Site ID



State of Oregon Department of Environmental Quality

Accounting Section

811 SW Sixth Avenue, Portland, OR 97204-1390

Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511

Fax: (503)229-6977 TTY: (50)229-6993

Email: hazwaste@deg.state.or.us

Environmental Web s Quality	ite: www.DeqHazWaste.net
1. Reason for Submittal	To provide Ne w Notification of Regulated Waste Activity (complete entire form)
· · · · · · · · · · · · · · · · · · ·	☑ Initial Notification (\$200 non-refundable fee required)
	☐ Change in business ownership (represent the new owner) (No fee required)
	Reactivation of RCRA Site ID Number (\$200 non-refundable fee required)
	☐ To provide Revised Site Identification Information
	☐ To Withdraw Site Identification Number Effective Date: 03/02/1992
	Completion of RCRA waste activity
	Change in business ownership (represent the old owner)
	▼ To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13)
· · · · · · · · · · · · · · · · · · ·	Reporting Year: 1991 If ownership changed: X Filing for entire year Filing for partial year
2. RCRA Site ID Number:	ORD009056037
3a, Site Location Informatio	
Company Name:	Consolidated Metco Inc
Site Location:	13940 N RIVERGATE BLVD
	PORTLAND, OR 97203
T. 1	MULTNOMAH
Corp. Div. Reg. Nbr.: NAICS Code:	
Employee Count:	225
4a, Site Contact	
Person Name:	
Mailing Address:	
Country:	
Phone Number (Ext):	
Email Address:	
Sa Land Owner	
Name:	
Mailing Address:	
Country: Phone Number (Ext):	
Owner Type:	☐ Private ☐ Federal ☐ State ☐ County ☐ District ☐ Municipal ☐ Tribal ☐ Other
	

Site ID

RCRA Site ID Number:

6a Legal Owner	A. 10.		Jane.	VII.	199	4.	4		924	
	Consolidated M	etco, Inc.				•				
Mailing Address:	PO Box 83201 Portland, OR 97	7283-0201								
Country:	United States	7200-0201								
Phone Number (Ext):										
Owner Since:	01/01/1981			•						•
Owner Type:	X Private	☐ Federal	☐ State	☐ County	☐ District	☐ Municipal	☐Tribal	Other		
7a Site Operator	No. The A									
Name:		9								
Mailing Address:				(-		
Country:	1									
Phone Number (Ext):										
Operator Since:										
Operator Type:	☐ Private	☐ Federal	☐ State	☐ County	☐ District	☐ Municipal	Tribal	Other		
8a. Hazardous Waste Form	s Contact		Jacks V	1	10 PM			T.	211	
8a. Hazardous Waste Form Person Name:	s Contact		-34 %		14 12 12 12 12 12 12 12 12 12 12 12 12 12	7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	* 4		att of the second	
Person Name: Organization:	s Contact	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	, Jacks V		The Marie State of the State of			4. —		
Person Name:	Contact				Section 1				t in the state of	
Person Name: Organization: Mailing Address:	S Contact		Harris Section 1							
Person Name: Organization:	s Contact								American (4
Person Name: Organization: Mailing Address: Country:	s Contact									
Person Name: Organization: Mailing Address: Country: Phone Number (Ext):										
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address:										
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Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Person Name: Organization: Mailing Address:										
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Person Name: Organization: Mailing Address: Country:										A C
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Person Name: Organization: Mailing Address:										

Site ID

RCRA Site ID Number:

10. Hszardous Waete Activities (Mark the appropriate boxes for activities that	apply to your site)
1. Generator of Hazardous Waste	☐ 6. Treatment, Storage, Disposal (TSD) Facility
a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or	(Note: A RCRA Permit is required for this activity)
more than 2.2 lbs of acute hazardous waste) b. SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo	7. Recycler of Hazardous Waste
or more than 2,200 lbs accumulated on-site)	☐ a. Recycles HW generated at this facility
c. CEG: Conditionally Exempt Generator: (Generates between 0-220 lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200	☐ b. Recycles HW generated by other facilities
lbs accumulated on-site)	Hazardous waste management in RCRA permit exempt units (e.g. elementary neutralization units, waste water
Are you a hazardous waste generator due to remediation of environmental contamination or a business closure?	treatment units, or accumulation tanks or containers)
Yes No	☐ a. Manages HW generated at this facility
If yes, find out about expedited annual reporting at:	☐ b. Manages HW generated by other facilities
www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p	9. Exempt Boiler and/or Industrial Furnace
☐ 3. Importer of Hazardous Waste	a. Small Quantity On-Site Burner Exemption
☐ 4. Generator of Mixed Waste (hazardous and radioactive)	☐ b. Smelting, Melting, Refining Furnace Exemption
5. Transporter of Hazardous Waste	☐ 10. Underground Injection Control
a. Transports hazardous waste generated at this facility	If yes, there may be addition reporting requirements at:
b. Transports for commercial purposes	www.deq.state.or.us/wq/groundwa/uichome.htm
☐ c. Hazardous Waste Transfer Facility	
11. Description of Hazardousi Whates	
1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal	
(e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fed	leral codes in the comments section.
2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Identi	fv the Oregon state-only hazardous waste codes that best
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	• • • • • • • • • • • • • • • • • • •
12. Universal Waste Activities (Mark the appropriate poxes for activities that a	ppty to your sife)
☐ 1. Large Quantity Handler of Universal Waste	☐ 4. Destination Facility for Universal Waste
(Accumulates a total of 11,000 lbs. or more of universal waste	(A facility that treats, disposes of, or recycles universal wastes on-site)
at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site	5. Mark all boxes that apply
(Accumulates a total of 2,000 lbs. or more of universal waste	
received from off-site). If yes, there are additional notification	Generate Accumulate
requirements at: www.deg.state.or.us/wmc/documents/uwnotification.pdf	a. Batteries
☐ 3. Pesticide Collection Program	b. Mercury containing thermostats
(Collects and accumulates waste pesticides from off-site). If	c. Lamps
yes, there are additional notification requirements at:	d. Pesticides
www.deq.state.or.us/wmc/documents/uwnotification.pdf	The state of the s
13 Used Oil Activities (Mark the appropriate boxes for activities that apply to	(dursite)
1. Used Oil Collection Center	
☐ 2. Used Oil Transporter	☐ 5. Off-Specification Used Oil Burner (not used oil space
	heaters operating according to CFR 279.23)
☐ 3. Used Oil Transfer Facility	heaters operating according to CFR 279.23) 6. Used Oil Fuel Marketer
4. Used Oil Processor/Re-refiner	heaters operating according to CFR 279.23) 6. Used Oil Fuel Marketer Indicate type(s) of activity(s)
4. Used Oil Processor/Re-refiner Indicate type(s) of activity(s)	heaters operating according to CFR 279.23) 6. Used Oil Fuel Marketer
4. Used Oil Processor/Re-refiner	heaters operating according to CFR 279.23) 6. Used Oil Fuel Marketer Indicate type(s) of activity(s) a. Marketer who directs shipments of off-specification used oil

Site ID

RCRA Site ID Number:

14. Comments The Comments of t				
		This form cannot be process		
I certify that under penalty of law that I have person demonstration and all attached documents, and to obtaining the information, I believe that the submi- significant penalties for submitting false information	hat, based on my inquiry of those itted information is true, accurate	individuals immediately res and complete. I am aware t	oonsible for	
Signature		Date		
Signature Name (print or type)		Date Title		_
		Title it, please contact the Hazardoi	ıs Waste Section	_
Name (print or type) If you have special accommodation needs or require to		Title it, please contact the Hazardoi	is Waste Section	ASS.

RCRA Waste Site Identification Form Site ID State of Oregon Department of Environmental Quality Accounting Section 811 SW Sixth Avenue, Portland, OR 97204-1390 Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511 Fax: (503)229-6977 TTY: (50)229-6993 Email: hazwaste@deq.state.or.us Department of Environmental Quality Web site: www.DeqHazWaste.net To provide New Notification of Regulated Waste Activity (complete entire form) 1. Reason for Submittal Initial Notification (\$200 non-refundable fee required) Change in business ownership (represent the new owner) (No fee required) Reactivation of RCRA Site ID Number (\$200 non-refundable fee required) ☐ To provide **Revised** Site Identification Information ☐ To Withdraw Site Identification Number Effective Date: 02/23/1993 Completion of RCRA waste activity Change in business ownership (represent the old owner) X To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13) 1992 Filing for partial year Reporting Year: If ownership changed: X Filing for entire year ORD009056037 2. RCRA Site ID Number: 3a. Site Location information Company Name: Consolidated Metco Inc Site Location: 13940 N RIVERGATE BLVD PORTLAND, OR 97203 County: MULTNOMAH Corp. Div. Reg. Nbr.: NAICS Code: Employee Count: 225 Site Contact Person Name: Mailing Address: Country: Phone Number (Ext): Email Address: 5a. Land Owner Name: Mailing Address: Country: Phone Number (Ext): ☐ State ☐ County ☐ District ☐ Municipal ☐ Tribal Other Owner Type: ☐ Private ☐ Federal

Site ID

RCRA Site ID Number:

6a Legal Owner	7.00		7,144	11.22	4		*		
	Consolidated N								
Mailing Address:	Portland, OR 9								
Country:	United States					:			
Phone Number (Ext):	(503) 286-574	1							
Owner Since:	01/01/1981								
Owner Type:	X Private	☐ Federal	☐ State	☐ County	☐ District	☐ Municipal	Tribal	☐ Other	
7a Site Operator	WATER T		4,		, and the second		#14. 1	į.	Total C
Name:									
Mailing Address:						•			
Country:									
Phone Number (Ext):				•					
Operator Since: Operator Type:		☐ Federal	State	☐ County	☐ District	☐ Municipal	☐Tribal	Other	· ·
						_			
8a. Hazarrious Waste Form	<u> </u>	7/2		in	•		y d	4	
Person Name:			2015 1-55						
Person Name: Organization:			Section 1						
Person Name: Organization: Mailing Address:				221111111					
Person Name: Organization: Mailing Address: Country:	And the second s		The same can						
Person Name: Organization: Mailing Address:									
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address:									
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Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Sa Hazardous Waste Fee O	Contact								
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address:	Contact								
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Person Name: Organization: Mailing Address:	Contact								
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Person Name: Organization: Mailing Address: Country:	Contact								
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Person Name: Organization: Mailing Address:	ontagt								

Site ID

RCRA Site ID Number:

10 Flagardous Waste Activities (Mark the appropriate boxes for activities that	apply to your site)
1. Generator of Hazardous Waste	☐ 6. Treatment, Storage, Disposal (TSD) Facility
a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or	(Note: A RCRA Permit is required for this activity)
more than 2.2 lbs of acute hazardous waste)	7. Recycler of Hazardous Waste
b. SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo or more than 2,200 lbs accumulated on-site)	\square a. Recycles HW generated at this facility
C. CEG: Conditionally Exempt Generator: (Generates between 0-220	b. Recycles HW generated by other facilities
lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200 lbs accumulated on-site)	8. Hazardous waste management in RCRA permit exempt
2. Are you a hazardous waste generator due to remediation	units (e.g. elementary neutralization units, waste water
of environmental contamination or a business closure?	treatment units, or accumulation tanks or containers)
☐ Yes 🗵 No	a. Manages HW generated at this facility
If yes, find out about expedited annual reporting at:	☐ b. Manages HW generated by other facilities
www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p	9. Exempt Boiler and/or Industrial Furnace
☐ 3. Importer of Hazardous Waste	a. Small Quantity On-Site Burner Exemption
4. Generator of Mixed Waste (hazardous and radioactive)	☐ b. Smelting, Melting, Refining Furnace Exemption
5. Transporter of Hazardous Waste	☐ 10. Underground Injection Control
☐ a. Transports hazardous waste generated at this facility	If yes, there may be addition reporting requirements at:
b. Transports for commercial purposes	www.deq.state.or.us/wq/groundwa/uichome.htm
☐ c. Hazardous Waste Transfer Facility	The state of the s
11. Description of Hazardous Wastes	
1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal	
(e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fed	leral codes in the comments section.
2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Identi	fy the Oregon state-only hazardous waste codes that best
2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Identidescribe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	fy the Oregon state-only hazardous waste codes that best
	fy the Oregon state-only hazardous waste codes that best
	fy the Oregon state-only hazardous waste codes that best
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	poly to your site) 4. Destination Facility for Universal Waste
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12. Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste	A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes)
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describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12-Universal Waste Activities (Mark the appropriate boxes for activities that a	A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site)
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describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12-Universal Waste Activities (Mark the appropriate boxes for activities that a	A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
12. Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12. Universal Waste Activities (Mark the appropriate boxes for activities that a	A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries b. Mercury containing thermostats
12. Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program	A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries b. Mercury containing thermostats c. Lamps
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12. Universal Waste Activities (Mark the appropriate boxes for activities that a	A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries
12-Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf	A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries
1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oif Activities (Mark the appropriate boxes for activities that apply to	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 1. Used Oil Collection Center 1. Used Oil Col	A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
12-Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to 1. Used Oil Collection Center 2. Used Oil Transporter	A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to 1. Used Oil Transporter 2. Used Oil Transporter 3. Used Oil Transfer Facility	## A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at:	A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate

Site ID

RCRA Site ID Number:

14 Comments	7		E Common		41702	55000
		1.4				
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	10.5 %		This form car	nnot be processed	d without a signa	ature
15. Certification						
I certify that under penalty of demonstration and all attache obtaining the information, I be significant penalties for subm	ed documents, and the elieve that the submitt	at, based on my inquiry ed information is true, a	of those individuals in of those individuals in accurate, and complet	mmediately respo e. I am aware the	onsible for	
I certify that under penalty of demonstration and all attache obtaining the information, I be	ed documents, and the elieve that the submitt	at, based on my inquiry ed information is true, a	of those individuals in of those individuals in accurate, and complet	mmediately respo e. I am aware the	onsible for	
I certify that under penalty of demonstration and all attache obtaining the information, I be	ed documents, and the elieve that the submitt	at, based on my inquiry ed information is true, a	of those individuals in of those individuals in accurate, and complet	mmediately respo e. I am aware the	onsible for	
I certify that under penalty of demonstration and all attache obtaining the information, I be significant penalties for subm	ed documents, and the elieve that the submitt	at, based on my inquiry ed information is true, a	r of those individuals ir accurate, and complet ity of fine and imprisor	mmediately respo e. I am aware the	onsible for	
I certify that under penalty of demonstration and all attache obtaining the information, I be significant penalties for subm	ed documents, and the elieve that the submitt	at, based on my inquiry ed information is true, a	r of those individuals ir accurate, and complet ity of fine and imprisor	mmediately respo e. I am aware the	onsible for	
I certify that under penalty of demonstration and all attache obtaining the information, I be significant penalties for subm Signature	ed documents, and the elieve that the submitt itting false information	at, based on my inquiry ed information is true, a n, including the possibil is documentin an alterna	r of those individuals in accurate, and complet ity of fine and imprisor Date Title	mmediately respo e. I am aware the nment.	onsible for at there are	
I certify that under penalty of demonstration and all attache obtaining the information, I be significant penalties for submediators. Signature Name (print or type) If you have special accommodal	ed documents, and the elieve that the submitt itting false information	at, based on my inquiry ed information is true, a n, including the possibil is documentin an alterna	r of those individuals in accurate, and complet ity of fine and imprisor Date Title	mmediately respo e. I am aware the nment.	onsible for at there are	



State of Oregon Department of Environmental Quality

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Accounting Section

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Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511

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Email: hazwaste@deq.state.or.us Web site: www.DeqHazWaste.net

Quality	. www.boqriazvvasto.net
1. Reason for Submittal	To provide New Notification of Regulated Waste Activity (complete entire form)
	☐ Initial Notification (\$200 non-refundable fee required)
	Change in business ownership (represent the new owner) (No fee required)
	Reactivation of RCRA Site ID Number (\$200 non-refundable fee required)
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	To Withdraw Site Identification Number Effective Date: 02/22/1994
	Completion of RCRA waste activity
	Change in business ownership (represent the old owner)
	X To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13)
	Reporting Year: 1993 If ownership changed: 💢 Filing for entire year 🔃 Filing for partial year
2. RCRA Site ID Number:	ORD009056037
3a. Site Location Information	
Company Name: Co	onsolidated Metco Inc
	940 N RIVERGATE BLVD
	ORTLAND, OR 97203
County: Mc	ULTNOMAH
NAICS Code:	
Employee Count: 22	25
48. Site Contact	
Person Name: Bri	ice Barker
Mailing Address:	
Country: Phone Number (Ext):	
Email Address:	
6a. Land Owner	
	onsolidated Metco, Inc.
Mailing Address: PC	
	ortland, OR 97283-0201
Country: Un	
Phone Number (Ext): (50 Owner Type:	
Owner Type.	☑ Private ☐ Federal ☐ State ☐ County ☐ District ☐ Municipal ☐ Tribal ☐ Other

Site ID

RCRA Site ID Number:

6a Legal Owner		H THE							
Mailing Address:	Consolidated M PO Box 83201 Portland, OR 97 United States	٠			-				
Phone Number (Ext): Owner Since:									
Owner Type:	X Private	☐ Federal	☐ State	☐ County	☐ District	☐ Municipal	☐Tribal	Other	
7a. Site Operator	periodic and the second		1495		12.0		100	1	
Name: Mailing Address:	Ernest Nimister PO Box 83201 Portland, OR 97	7283-0201					:		
Country: Phone Number (Ext): Operator Since:	United States				·				
Operator Type:	☐ Private	☐ Federal	State	☐ County	☐ District	☐ Municipal	☐Tribal	Other	
8a Hazardous Waste Porm	e Contact	- al - 10			. N.		197		****
Person Name: Organization: Mailing Address:	**************************************							2 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /	10 10 10 10 10 10 10 10 10 10 10 10 10 1
Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	•				(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)				
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Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Person Name: Organization:	Contact 7 (35)								
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: 88. Hazardous Waste Fee C	Contact 7 (35)								

Site ID

RCRA Site ID Number:

10. Hazerdout Waste Activities (Mark the appropriate boxes for activities that	aphly to your site)
1. Generator of Hazardous Waste	☐ 6. Treatment, Storage, Disposal (TSD) Facility
a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or	(Note: A RCRA Permit is required for this activity)
more than 2.2 lbs of acute hazardous waste) Solution Example 1 Example 2.2 lbs of acute hazardous waste)	7. Recycler of Hazardous Waste
or more than 2.200 lbs accumulated on-site)	a. Recycles HW generated at this facility
Li c. CEG: Conditionally Exempt Generator: (Generates between 0-220 lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200	☐ b. Recycles HW generated by other facilities
lbs accumulated on-site)	8. Hazardous waste management in RCRA permit exempt units (e.g. elementary neutralization units, waste water
Are you a hazardous waste generator due to remediation of environmental contamination or a business closure?	treatment units, or accumulation tanks or containers)
Yes X No	☐ a. Manages HW generated at this facility
If yes, find out about expedited annual reporting at:	☐ b. Manages HW generated by other facilities
www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p	9. Exempt Boiler and/or Industrial Furnace
☐ 3. Importer of Hazardous Waste	a. Small Quantity On-Site Burner Exemption
☐ 4. Generator of Mixed Waste (hazardous and radioactive)	☐ b. Smelting, Melting, Refining Furnace Exemption
5. Transporter of Hazardous Waste	☐ 10. Underground Injection Control
a. Transports hazardous waste generated at this facility	If yes, there may be addition reporting requirements at:
b. Transports for commercial purposes	www.deq.state.or.us/wq/groundwa/uichome.htm
c. Hazardous Waste Transfer Facility	THE COURSE AND A STREET OF THE STREET
11. Description of Hazardous Wastes	
1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal	
(e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fed	teral codes in the comments section.
2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Ident	fy the Oregon state-only hazardous waste codes that best
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	
12. Universal Waste Activities (Mark the appropriate boxes for activities that a	pply to your s(te)
1. Large Quantity Handler of Universal Waste	4. Destination Facility for Universal Waste
(Accumulates a total of 11,000 lbs. or more of universal waste	(A facility that treats, disposes of, or recycles universal wastes on-site)
at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site	5. Mark all boxes that apply
(Accumulates a total of 2,000 lbs. or more of universal waste	
received from off-site). If yes, there are additional notification	Concrete Accumulate I
requirements at:	Generate Accumulate
www.dog.stato.or.us/wmo/dogumonts/uwpotification.ndf	a. Batteries
www.deq.state.or.us/wmc/documents/uwnotification.pdf	
3. Pesticide Collection Program	a. Batteries
☐ 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at:	a. Batteries
☐ 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If	a. Batteries
☐ 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at:	a. Batteries
☐ 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf	a. Batteries
☐ 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to	a. Batteries b. Mercury containing thermostats c. Lamps d. Pesticides 5. Off-Specification Used Oil Burner (not used oil space heaters operating according to CFR 279.23)
☐ 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to ☐ 1. Used Oil Collection Center	a. Batteries b. Mercury containing thermostats c. Lamps d. Pesticides 5. Off-Specification Used Oil Burner (not used oil space heaters operating according to CFR 279.23) 6. Used Oil Fuel Marketer
□ 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to □ 1. Used Oil Collection Center □ 2. Used Oil Transporter	a. Batteries b. Mercury containing thermostats c. Lamps d. Pesticides 5. Off-Specification Used Oil Burner (not used oil space heaters operating according to CFR 279.23) 6. Used Oil Fuel Marketer Indicate type(s) of activity(s)
 ☐ 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to ☐ 1. Used Oil Collection Center ☐ 2. Used Oil Transporter ☐ 3. Used Oil Transfer Facility 	a. Batteries b. Mercury containing thermostats c. Lamps d. Pesticides 5. Off-Specification Used Oil Burner (not used oil space heaters operating according to CFR 279.23) 6. Used Oil Fuel Marketer Indicate type(s) of activity(s) a. Marketer who directs shipments of off-specification used oil
□ 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to □ 1. Used Oil Collection Center □ 2. Used Oil Transporter □ 3. Used Oil Transfer Facility 4. Used Oil Processor/Re-refiner	a. Batteries b. Mercury containing thermostats c. Lamps d. Pesticides 5. Off-Specification Used Oil Burner (not used oil space heaters operating according to CFR 279.23) 6. Used Oil Fuel Marketer Indicate type(s) of activity(s)

Site ID

RCRA Site ID Number:

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RCRA Waste Site Identification Form Site ID State of Oregon Department of Environmental Quality Accounting Section 811 SW Sixth Avenue, Portland, OR 97204-1390 Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511 Fax: (503)229-6977 TTY: (50)229-6993 Department of Email: hazwaste@deq.state.or.us **Environmental** Web site: www.DegHazWaste.net Quality ☐ To provide **New** Notification of Regulated Waste Activity (complete entire form) 1. Reason for Submittal Initial Notification (\$200 non-refundable fee required) Change in business ownership (represent the new owner) (No fee required) Reactivation of RCRA Site ID Number (\$200 non-refundable fee required) To provide **Revised** Site Identification Information ☐ To Withdraw Site Identification Number Effective Date: 02/13/1995 Completion of RCRA waste activity Change in business ownership (represent the old owner) X To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13) Reporting Year: If ownership changed: X Filing for entire year Filing for partial year ORD009056037 2. RCRA Site ID Number: 3a. Site Location information Company Name: Consolidated Metco Inc Site Location: 13940 N RIVERGATE BLVD PORTLAND, OR 97203 County: MULTNOMAH Corp. Div. Reg. Nbr.: NAICS Code: Employee Count: 225 4a. Site Contact Person Name: Brice Barker Mailing Address: Country: Phone Number (Ext): Email Address: 5a: Land Owner Name: Consolidated Metco, Inc. Mailing Address: PO Box 83201 Portland, OR 97283-0201

Country: United States

X Private

☐ Federal

☐ State

☐ County

☐ District ☐ Municipal ☐ Tribal

Phone Number (Ext): (503) 286-5741 Owner Type:

Other

Site ID

RCRA Site ID Number:

6a. Legal Owner			17.5		Security of the second		,		
Name: Mailing Address:	Consolidated M	letco, Inc.							
Walling Address.	Portland, OR 9	7283-0201							
Country:	United States								
Phone Number (Ext):	(503) 286-5741								
Owner Since:	01/01/1981								
Owner Type:	X Private	☐ Federal	☐ State	☐ County	☐ District	☐ Municipal	Tribal	☐ Other	
7a Site Operator		175						i _k ii	
	Consolidated M	letco, Inc.							
Mailing Address:	PO Box 83201 Portland, OR 9	7283_0201							
Country:	United States	7200-0201							
Phone Number (Ext):	(503) 286-5741	l							
Operator Since:									•
Operator Type:	Private	☐ Federal	☐ State	☐ County	☐ District	☐ Municipal	□Tribal	Other	
L. State Self-									
8a. Hazartious Waste Form	e Contact				建	集海域	1 2		
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Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Person Name: Organization: Mailing Address: Country:	Contact								

Site ID

RCRA Site ID Number:

40. Hazardous Waste Activities (Mark the appropriate boxes for activities that	apply to your site)
1. Generator of Hazardous Waste	☐ 6. Treatment, Storage, Disposal (TSD) Facility
a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or	(Note: A RCRA Permit is required for this activity)
more than 2.2 lbs of acute hazardous waste) SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo	7. Recycler of Hazardous Waste
or more than 2.200 lbs accumulated on-site)	☐ a. Recycles HW generated at this facility
Li c. CEG: Conditionally Exempt Generator: (Generates between 0-220 lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200	☐ b. Recycles HW generated by other facilities
lbs accumulated on-site)	8. Hazardous waste management in RCRA permit exempt
2. Are you a hazardous waste generator due to remediation	units (e.g. elementary neutralization units, waste water treatment units, or accumulation tanks or containers)
of environmental contamination or a business closure? ☐ Yes 🛣 No	☐ a. Manages HW generated at this facility
	☐ b. Manages HW generated by other facilities
If yes, find out about expedited annual reporting at: www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p	9. Exempt Boiler and/or Industrial Furnace
☐ 3. Importer of Hazardous Waste	□ a. Small Quantity On-Site Burner Exemption
4. Generator of Mixed Waste (hazardous and radioactive)	□ b. Smelting, Melting, Refining Furnace Exemption
5. Transporter of Hazardous Waste	☐ 10. Underground Injection Control
☐ a. Transports hazardous waste generated at this facility	If yes, there may be addition reporting requirements at:
☐ b. Transports for commercial purposes	www.deq.state.or.us/wq/groundwa/uichome.htm
c. Hazardous Waste Transfer Facility	
11. Description of Hazardous Wastes	
1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal	hazardous waste codes that best describe your waste
(e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fee	deral codes in the comments section.
2 Wasta Codes for State Begulated/i a non federal) He-orders Western Identi	if the Oregon state only hazardays waste added that heet
 Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Ident describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 	ify the Oregon state-only hazardous waste codes that best
	ify the Oregon state-only hazardous waste codes that best
	ify the Oregon state-only hazardous waste codes that best
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describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12. Universal Waste Activities (Mark the appropriate boxes for activities that a large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes
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describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12. Universal Waste Activities (Mark the appropriate boxes for activities that a large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program	Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12. Universal Waste Activities (Mark the appropriate boxes for activities that a large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at:	### 4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries b. Mercury containing thermostats
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12. Universal Waste Activities (Mark the appropriate boxes for activities that a large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If	### A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
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describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12. Universal Waste Activities (Mark the appropriate boxes for activities that a large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf	### 4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
12. Universal Waste Activities (Mark the appropriate boxes for activities that a community of universal waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at:	### 4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
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Site ID

RCRA Site ID Number:

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RCRA Waste Site Identification Form Site ID State of Oregon Department of Environmental Quality Accounting Section 811 SW Sixth Avenue, Portland, OR 97204-1390 Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511 Fax: (503)229-6977 TTY: (50)229-6993 Email: hazwaste@deq.state.or.us Department of Environmental Web site: www.DeqHazWaste.net Quality ☐ To provide **New** Notification of Regulated Waste Activity (complete entire form) 1. Reason for Submittal Initial Notification (\$200 non-refundable fee required) Change in business ownership (represent the new owner) (No fee required) Reactivation of RCRA Site ID Number (\$200 non-refundable fee required) To provide **Revised** Site Identification Information ☐ To Withdraw Site Identification Number Effective Date: 02/07/1996 Completion of RCRA waste activity Change in business ownership (represent the old owner) X To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13) 1995 Reporting Year: Filing for partial year If ownership changed: | Filing for entire year ORD009056037 2. RCRA Site ID Number: 3a. Site Location Information Company Name: Consolidated Metco Inc Site Location: 13940 N RIVERGATE BLVD PORTLAND, OR 97203 County: MULTNOMAH Corp. Div. Reg. Nbr.: NAICS Code: Employee Count: 225 4s. Site Contact Person Name: Brice Barker Mailing Address: Country: Phone Number (Ext): Email Address: 5a. Land Owner

Name: Consolidated Metco, Inc.

X Private

Portland: OR 97283-0201

☐ Federal

☐ State

☐ County

☐ District

☐ Municipal ☐ Tribal

Mailing Address: PO Box 83201

Phone Number (Ext): (503) 286-5741 Owner Type:

Country: United States

Site ID

RCRA Site ID Number:

Så: Legal Owner	4 % -	and Carlotte		Table 7 th	A June	1000		1.14 1.14
Mailing Address	: Consolidated Metco : PO Box 83201 Portland, OR 97283 : United States						÷	
Phone Number (Ext)								
Owner Type	: 🗓 Private 🗌	Federal S	ate 🗌 Count	y 🗌 District	☐ Municipal	Tribal	Other	·
7a Site Operator	Train	A 11/2/E				40		
Mailing Address	: Consolidated Metco : PO Box 83201 Portland, OR 97283 : United States							
Phone Number (Ext)	: (503) 286-5741							
Operator Since Operator Type		Federal S	ate 🗌 Count	y 🗌 District	☐ Municipal	□Tribal	Other	
68 Hazardous Waste For	ne-Contact	" Lyn	17					
#8: Hazardous Waste Fon Person Name Organization Mailing Address								
Person Name Organization							#	
Person Name Organization Mailing Address Country Phone Number (Ext)								
Person Name Organization Mailing Address Country Phone Number (Ext) Email Address	Contact							

Site ID

RCRA Site ID Number:

10 Hazardous Waste Autivities (Mark the appropriate boxes for activities that	apply to your site)
1. Generator of Hazardous Waste	☐ 6. Treatment, Storage, Disposal (TSD) Facility
a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or	(Note: A RCRA Permit is required for this activity)
more than 2.2 lbs of acute hazardous waste) b. SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo	7. Recycler of Hazardous Waste
or more than 2.200 lbs accumulated on-site)	a. Recycles HW generated at this facility
X c. CEG: Conditionally Exempt Generator: (Generates between 0-220 lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200	☐ b. Recycles HW generated by other facilities
lbs accumulated on-site)	8. Hazardous waste management in RCRA permit exempt
2. Are you a hazardous waste generator due to remediation	units (e.g. elementary neutralization units, waste water treatment units, or accumulation tanks or containers)
of environmental contamination or a business closure?	☐ a. Manages HW generated at this facility
☐ Yes	☐ b. Manages HW generated by other facilities
If yes, find out about expedited annual reporting at: www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p	9. Exempt Boiler and/or Industrial Furnace
☐ 3. Importer of Hazardous Waste	a. Small Quantity On-Site Burner Exemption
☐ 4. Generator of Mixed Waste (hazardous and radioactive)	☐ b. Smelting, Melting, Refining Furnace Exemption
5. Transporter of Hazardous Waste	☐ 10. Underground Injection Control
\square a. Transports hazardous waste generated at this facility	If yes, there may be addition reporting requirements at:
b. Transports for commercial purposes	www.deq.state.or.us/wq/groundwa/uichome.htm
☐ c. Hazardous Waste Transfer Facility	
11. Description of Flazardous Wastes	
1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal	
(e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fed	deral codes in the comments section.
la l	
2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Identi	fy the Oregon state-only hazardous waste codes that best
2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Identification describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	fy the Oregon state-only hazardous waste codes that best
	fy the Oregon state-only hazardous waste codes that best
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12. Universal Waste Activities (Mark the appropriate boxes for activities that a	pply to you (site)
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describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12. Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Cil Activities (Mark the appropriate boxes for activities that apply to 1. Used Oil Collection Center 2. Used Oil Transporter	### 4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12. Universal Waste Activities (Mark the appropriate boxes for activities that a	### 4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
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Site ID

RCRA Site ID Number:

14. Comments				
				d'
15 Certification		This form cannot be proc	essed without a signa	ture
I certify that under penalty of law that I have personally demonstration and all attached documents, and that, be obtaining the information, I believe that the submitted in significant penalties for submitting false information, inc	ased on my inquiry of those nformation is true, accurate	e individuals immediately , and complete. I am awa	responsible for	
demonstration and all attached documents, and that, be obtaining the information, I believe that the submitted in significant penalties for submitting false information, inc	ased on my inquiry of those nformation is true, accurate	e individuals immediately e, and complete. I am awa e and imprisonment.	responsible for	
demonstration and all attached documents, and that, be obtaining the information, I believe that the submitted in	ased on my inquiry of those nformation is true, accurate	e individuals immediately , and complete. I am awa	responsible for	
demonstration and all attached documents, and that, be obtaining the information, I believe that the submitted in significant penalties for submitting false information, inc	ased on my inquiry of those nformation is true, accurate	e individuals immediately e, and complete. I am awa e and imprisonment.	responsible for	
demonstration and all attached documents, and that, but obtaining the information, I believe that the submitted in significant penalties for submitting false information, inc. Signature	ased on my inquiry of those information is true, accurate cluding the possibility of fine ncumentin an alternative form	e individuals immediately e, and complete. I am awa e and imprisonment. Date Title at, please contact the Hazai	responsible for re that there are	
demonstration and all attached documents, and that, be obtaining the information, I believe that the submitted in significant penalties for submitting false information, inc. Signature Name (print or type) If you have special accommodation needs or require this do	ased on my inquiry of those information is true, accurate cluding the possibility of fine ncumentin an alternative form	e individuals immediately e, and complete. I am awa e and imprisonment. Date Title at, please contact the Hazai	responsible for re that there are	

Site ID



State of Oregon Department of Environmental Quality

State of Oregon Department of Environmental Quality

Accounting Section

811 SW Sixth Avenue, Portland, OR 97204-1390

Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511

Fax: (503)229-6977 TTY: (50)229-6993

Email: hazwaste@deq.state.or.us Web site: www.DeqHazWaste.net

Quality	s. www.Deq11a2vvasie.net
1. Reason for Submittal	☐ To provide New Notification of Regulated Waste Activity (complete entire form)
*	☐ Initial Notification (\$200 non-refundable fee required)
	☐ Change in business ownership (represent the new owner) (No fee required)
	Reactivation of RCRA Site ID Number (\$200 non-refundable fee required)
	☐ To provide Revised Site Identification Information
	☐ To Withdraw Site Identification Number Effective Date: 02/10/1997
	Completion of RCRA waste activity
	☐ Change in business ownership (represent the old owner)
	X To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13)
	Reporting Year: 1996 If ownership changed: 🔀 Filing for entire year 🗌 Filing for partial year
2. RCRA Site ID Number:	ORD009056037
3a. 5 lo Cocation (information	
Company Name: Co	onsolidated Metco Inc
	3940 N RIVERGATE BLVD
PC	ORTLAND, OR 97203
County: M	ULTNOMAH
Corp. Div. Reg. Nbr.:	
NAICS Code:	en e
Employee Count: 2	25
48 Sile Contact	
Person Name: Br	rice Barker
Mailing Address:	
On contain in	
Country: Phone Number (Ext):	
Email Address:	
58) Land Dwner	
Name: Co	onsolidated Metco, Inc.
Mailing Address: Po	
	ortland, OR 97283-0201
Country: Ur Phone Number (Ext): (5	
	☑ Private ☐ Federal ☐ State ☐ County ☐ District ☐ Municipal ☐ Tribal ☐ Other

Site ID

RCRA Site ID Number:

6a. Legal Owner	Washing.			252 102 7	25)				1
	Consolidated Metco	o, Inc.							
Mailing Address:	Portland, OR 97283	3-0201							
Country:	United States								
Phone Number (Ext):	(503) 286-5741						•		
Owner Since:	01/01/1981								
Owner Type:	X Private	Federal	☐ State	☐ County	☐ District	☐ Municipal	☐ Tribal	☐ Other	
7a. Site Operator	- Table	*	17.7				1 - V-		
Name:	Consolidated Metco	o, Inc.							
Mailing Address:									
Country	Portland, OR 97283 United States	3-0201							
Phone Number (Ext):									•
Operator Since:									
Operator Type:	▼ Private □	Federal	☐ State	☐ County	☐ District	☐ Municipal	☐ Tribal	☐ Other	
ta: Hazardous Waste Form	e Contact		Ŷ	7-770		糧工権	T Wall		
9a: Pazardous Waste Form Person Name:	s Contact		area g						# # # # # # # # # # # # # # # # # # #
Person Name: Organization:	s Contact					Table Valle			
Person Name:	s Contact						A CALL		
Person Name: Organization:	s Contact								
Person Name: Organization: Mailing Address:	s Contact								
Person Name: Organization: Mailing Address: Country:	s Contact								
Person Name: Organization: Mailing Address: Country: Phone Number (Ext):									
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Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Saf Hazardous Waste Fee 6									
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: 9a/ Hazardous Waste Fac (Person Name: Organization: Mailing Address:									
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: \$\forganization: Person Name: Organization:									
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Person Name: Organization: Mailing Address: Country:									

Site ID

RCRA Site ID Number:

10. Hazardaus Waste Activities (Mark the appropriate boxes for activities that	apply to your site)
1. Generator of Hazardous Waste	☐ 6. Treatment, Storage, Disposal (TSD) Facility
a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or	(Note: A RCRA Permit is required for this activity)
more than 2.2 lbs of acute hazardous waste) b. SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo	7. Recycler of Hazardous Waste
or more than 2.200 lbs accumulated on-site)	☐ a. Recycles HW generated at this facility
C. CEG: Conditionally Exempt Generator: (Generates between 0-220 lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200	☐ b. Recycles HW generated by other facilities
lbs accumulated on-site)	Hazardous waste management in RCRA permit exempt units (e.g. elementary neutralization units, waste water
2. Are you a hazardous waste generator due to remediation of environmental contamination or a business closure?	treatment units, or accumulation tanks or containers)
Yes No	\square a. Manages HW generated at this facility
If yes, find out about expedited annual reporting at:	\square b. Manages HW generated by other facilities
www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p	9. Exempt Boiler and/or Industrial Furnace
☐ 3. Importer of Hazardous Waste	☐ a. Small Quantity On-Site Burner Exemption
☐ 4. Generator of Mixed Waste (hazardous and radioactive)	☐ b. Smelting, Melting, Refining Furnace Exemption
5. Transporter of Hazardous Waste	☐ 10. Underground Injection Control
a. Transports hazardous waste generated at this facility	If yes, there may be addition reporting requirements at:
b. Transports for commercial purposes	www.deq.state.or.us/wq/groundwa/uichome.htm
C. Hazardous Waste Transfer Facility	
11. Description of Hazardous Wastes	
1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal (e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fed	
(e.g., Door - Ignitable, Dooz - Corrosive, Doos - Reactive, etc.) List additional lec	detai codes in the confinents Section.
2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Ident	ify the Oregon state-only hazardous waste codes that best
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	
12. Universal Waste Activities (Mark the appropriate boxes for activities that a	pply to your site).
☐ 1. Large Quantity Handler of Universal Waste	4. Destination Facility for Universal Waste
(Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated)	(A facility that treats, disposes of, or recycles universal wastes on-site)
2. Off-site Universal Waste Collection Site	5. Mark all boxes that apply
(Accumulates a total of 2,000 lbs. or more of universal waste	Generate Accumulate
received from off-site). If yes, there are additional notification requirements at:	
www.deq.state.or.us/wmc/documents/uwnotification.pdf	a. Batteries
3. Pesticide Collection Program	
(Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at:	c. Lamps
www.deq.state.or.us/wmc/documents/uwnotification.pdf	d. Pesticides
13. Used Oil Activities (Mark the appropriate boxes for activities that apply to	yoursite)
☐ 1. Used Oil Collection Center	☐ 5. Off-Specification Used Oil Burner (not used oil space
☐ 2. Used Oil Transporter	heaters operating according to CFR 279.23)
☐ 3. Used Oil Transfer Facility	6. Used Oil Fuel Marketer
4. Used Oil Processor/Re-refiner	Indicate type(s) of activity(s)
Indicate type(s) of activity(s)	a. Marketer who directs shipments of off-specification used oil to off-specification used oil burner
a. Processor	b. Marketer who first claims the used oil to meet the
☐ b. Re-refiner	specifications

Site ID

RCRA Site ID Number:

4. Comments	344	***			1776	1	1.79	772	rest.	i i
								•		
5 Certification		7.7	No.	Th	is form canno	of he proc	essed wi	ithout a si	ignature	
16. Certification I certify that under penal demonstration and all at obtaining the information	tached documents	s, and that, base	ed on my inqui	m familiar wit ry of those in	dividuals imn	ntion subn nediately	nitted in i responsi	this ible for	ignature	• .
certify that under penal demonstration and all at obtaining the information	tached documents n, I believe that the	s, and that, base e submitted info	ed on my inqui rmation is true	m familiar wit ry of those in , accurate, ar	h the informa dividuals imn nd complete.	ntion subn nediately I am awa	nitted in i responsi	this ible for	ignature	
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RCRA Waste Site Identification Form Site ID State of Oregon Department of Environmental Quality Accounting Section 811 SW Sixth Avenue, Portland, OR 97204-1390 Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511 Fax: (503)229-6977 TTY: (50)229-6993 Email: hazwaste@deq.state.or.us Department of Environmental Quality Web site: www.DeqHazWaste.net 1. Reason for Submittal ☐ To provide **New** Notification of Regulated Waste Activity (complete entire form) Initial Notification (\$200 non-refundable fee required) Change in business ownership (represent the new owner) (No fee required) Reactivation of RCRA Site ID Number (\$200 non-refundable fee required) ☐ To provide **Revised** Site Identification Information ☐ To Withdraw Site Identification Number Effective Date: 01/09/1998 Completion of RCRA waste activity Change in business ownership (represent the old owner) X To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13) 1997 Reporting Year: If ownership changed: |X Filing for entire year Filing for partial year ORD009056037 2. RCRA Site ID Number: 3a. Site Location Information Company Name: Consolidated Metco Inc Site Location: 13940 N RIVERGATE BLVD PORTLAND, OR 97203 County: MULTNOMAH Corp. Div. Reg. Nbr.: NAICS Code: Employee Count: 225 4a. Site Contact Person Name: Brice Barker Mailing Address: Country: Phone Number (Ext): Email Address: 5a. Land Owner Name: Consolidated Metco, Inc. Mailing Address: PO Box 83201 Portland, OR 97283-0201 Country: United States

☐ County

☐ District ☐ Municipal ☐ Tribal

☐ State

Phone Number (Ext): (503) 286-5741

X Private

☐ Federal

Owner Type:

Other

Site ID

RCRA Site ID Number:

6a. L	egal Ovmer,	$\pm (\pm 1)^{n}$	114	No. of		桶。				441
	Mailing Address:	Portland, OR 9 United States	7283-0201							
	Owner Since:									
	Owner Type:	☑ Private	☐ Federal	☐ State	☐ County	☐ District	☐ Municipal	☐Tribal	Other	
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Site ID

RCRA Site ID Number:

10. Hazardous Waste Activities (Mark the appropriate boxes for activities that	apply to your site)
1. Generator of Hazardous Waste	☐ 6. Treatment, Storage, Disposal (TSD) Facility
a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or	(Note: A RCRA Permit is required for this activity)
more than 2.2 lbs of acute hazardous waste) b. SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo	7. Recycler of Hazardous Waste
or more than 2.200 lbs accumulated on-site)	\square a. Recycles HW generated at this facility
X c. CEG: Conditionally Exempt Generator: (Generates between 0-220	☐ b. Recycles HW generated by other facilities
lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200 lbs accumulated on-site)	8. Hazardous waste management in RCRA permit exempt
2. Are you a hazardous waste generator due to remediation	units (e.g. elementary neutralization units, waste water
of environmental contamination or a business closure?	treatment units, or accumulation tanks or containers)
☐ Yes No	a. Manages HW generated at this facility
If yes, find out about expedited annual reporting at: www.deg.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p	b. Manages HW generated by other facilities
Importer of Hazardous Waste	9. Exempt Boiler and/or Industrial Furnace
	a. Small Quantity On-Site Burner Exemption
4. Generator of Mixed Waste (hazardous and radioactive)	
5. Transporter of Hazardous Waste	☐ 10. Underground Injection Control
☐ a. Transports hazardous waste generated at this facility	If yes, there may be addition reporting requirements at:
b. Transports for commercial purposes	www.deq.state.or.us/wq/groundwa/uichome.htm
C. Hazardous Waste Transfer Facility	
11 Description of Hazardous Wastes	
1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal	
(e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fed	deral codes in the comments section.
Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Ident	ify the Oregon state-only bazardous waste codes that hest
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	ny mo orogen otato umy nazaraodo nadio ocaso mariosot
12 Universal Waste Activities (Mark the appropriate poxes for activities that a	apply to your site) it.
1. Large Quantity Handler of Universal Waste	☐ 4. Destination Facility for Universal Waste
(Accumulates a total of 11,000 lbs. or more of universal waste	(A facility that treats, disposes of, or recycles universal wastes on-site)
at any time, at the location at which it was generated)	5. Mark all boxes that apply
☐ 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste	
received from off-site). If yes, there are additional notification	Generate Accumulate
requirements at:	a. Batteries
www.deq.state.or.us/wmc/documents/uwnotification.pdf	b. Mercury containing thermostats
3. Pesticide Collection Program	c. Lamps
(Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at:	d. Pesticides
www.deq.state.or.us/wmc/documents/uwnotification.pdf	
13 Used Oil Activities (Mark the appropriate boxes for activities that apply to	your site)
☐ 1. Used Oil Collection Center	☐ 5. Off-Specification Used Oil Burner (not used oil space
2. Used Oil Transporter	heaters operating according to CFR 279.23)
☐ 3. Used Oil Transfer Facility	6. Used Oil Fuel Marketer
4. Used Oil Processor/Re-refiner	Indicate type(s) of activity(s)
Indicate type(s) of activity(s)	a. Marketer who directs shipments of off-specification used oil
a. Processor	to off-specification used oil burner
	b. Marketer who first claims the used oil to meet the

Site ID

RCRA Site ID Number:

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Site ID



State of Oregon Department of Environmental Quality

Accounting Section

811 SW Sixth Avenue, Portland, OR 97204-1390

Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511

Fax: (503)229-6977 TTY: (50)229-6993

Facility 1	: hazwaste@deq.state.or.us site: www.DeqHazWaste.net
1. Reason for Submittal	☐ To provide New Notification of Regulated Waste Activity (complete entire form)
	Initial Notification (\$200 non-refundable fee required)
	Change in business ownership (represent the new owner) (No fee required)
	Reactivation of RCRA Site ID Number (\$200 non-refundable fee required)
	☐ To provide Revised Site Identification Information
	☐ To Withdraw Site Identification Number Effective Date: 01/25/1999
	Completion of RCRA waste activity
	Change in business ownership (represent the old owner)
	▼ To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13)
	Reporting Year: 1998 If ownership changed: 💢 Filing for entire year 🔲 Filing for partial year
2. RCRA Site ID Number:	ORD009056037
3a. Site Location Information	
Company Name:	Consolidated Metco Inc
Site Location:	13940 N RIVERGATE BLVD
	PORTLAND, OR 97203
1	MULTNOMAH
Corp. Div. Reg. Nbr.: NAICS Code:	
Employee Count:	225
4a. Site Contact	
<u> </u>	Front Nicites
Mailing Address:	Ernest Nimister PO Box 83201
Walling / ldal ooo.	Portland, OR 97283-0201
Country:	United States
Phone Number (Ext):	
Email Address:	enimister@conmet.com
5a Land Owner	
	Consolidated Metco, Inc.
Mailing Address:	
Country	Portland, OR 97283-0201 United States
Phone Number (Ext):	
Owner Type:	☑ Private ☐ Federal ☐ State ☐ County ☐ District ☐ Municipal ☐ Tribal ☐ Other
	

Site ID

RCRA Site ID Number:

6a. Legal Owner				1 14	1	4 10	110		
Mailing Address	Portland, OR 97							:	
Country: Phone Number (Ext): Owner Since:									
Owner Since		☐ Federal	☐ State	☐ County	☐ District	☐ Municipal	☐ Tribal	☐ Other	
7a. Site Operator					•	***			THE PARTY OF THE P
	Consolidated Me	etco, Inc.			A part of the part		****		
	Portland, OR 97: United States	283-0201							
Phone Number (Ext): Operator Since:									
Operator Type:	X Private	☐ Federal	State	☐ County	☐ District	☐ Municipal	Tribal	Other	
			_						
8a. Hazardaus Waste Ford	is Contact			10 mm				1111	2
Person Name			Afficialis Dentis						in the same of the
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Person Name Organization									
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Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Sa. Hazardous Waste Fee Person Name: Organization:	Gontactivity Ernest Nimister Consolidated Me	etco Inc							
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Person Name: Organization: Mailing Address:	Ernest Nimister Consolidated Me PO Box 83201 Portland, OR 97: United States	,***							

Site ID

RCRA Site ID Number:

10. Hazardous Waste Activities (Mark the appropriate boxes for activities that	apply to your site)
1. Generator of Hazardous Waste	☐ 6. Treatment, Storage, Disposal (TSD) Facility
a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or	(Note: A RCRA Permit is required for this activity)
more than 2.2 lbs of acute hazardous waste) b. SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo	7. Recycler of Hazardous Waste
or more than 2.200 lbs accumulated on-site)	\square a. Recycles HW generated at this facility
C. CEG: Conditionally Exempt Generator: (Generates between 0-220	☐ b. Recycles HW generated by other facilities
lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200 lbs accumulated on-site)	8. Hazardous waste management in RCRA permit exempt
2. Are you a hazardous waste generator due to remediation	units (e.g. elementary neutralization units, waste water treatment units, or accumulation tanks or containers)
of environmental contamination or a business closure?	☐ a. Manages HW generated at this facility
☐ Yes	□ b. Manages HW generated by other facilities
If yes, find out about expedited annual reporting at: www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p	9. Exempt Boiler and/or Industrial Furnace
☐ 3. Importer of Hazardous Waste	a. Small Quantity On-Site Burner Exemption
4. Generator of Mixed Waste (hazardous and radioactive)	☐ b. Smelting, Melting, Refining Furnace Exemption
5. Transporter of Hazardous Waste	☐ 10. Underground Injection Control
a. Transports hazardous waste generated at this facility	If yes, there may be addition reporting requirements at:
b. Transports for commercial purposes	www.deq.state.or.us/wq/groundwa/uichome.htm
☐ c. Hazardous Waste Transfer Facility	
11. Description of Hazardons Wastes	
1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal	
(e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fed	deral codes in the comments section.
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2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Identi describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	fy the Oregon state-only hazardous waste codes that best
	fy the Oregon state-only hazardous waste codes that best
	fy the Oregon state-only hazardous waste codes that best
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Site ID

RCRA Site ID Number:

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15. Certification		This form cannot b	pe processed witho	ut a signature	
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I certify that under penalty of law that I hav demonstration and all attached documents obtaining the information, I believe that the significant penalties for submitting false inf	s, and that, based on my inquiry o submitted information is true, ac	of those individuals immed ocurate, and complete. I a	diately responsible m aware that ther	for	
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RCRA Waste Site Identification Form Site ID State of Oregon Department of Environmental Quality Accounting Section 811 SW Sixth Avenue, Portland, OR 97204-1390 Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511 Fax: (503)229-6977 TTY: (50)229-6993 Department of Email: hazwaste@deq.state.or.us Environmental Web site: www.DegHazWaste.net Quality To provide **New** Notification of Regulated Waste Activity (complete entire form) 1. Reason for Submittal Initial Notification (\$200 non-refundable fee required) Change in business ownership (represent the new owner) (No fee required) Reactivation of RCRA Site ID Number (\$200 non-refundable fee required) ☐ To provide **Revised** Site Identification Information ☐ To Withdraw Site Identification Number Effective Date: 01/13/2000 Completion of RCRA waste activity Change in business ownership (represent the old owner) X To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13) Reporting Year: 1999 Filing for partial year If ownership changed: X Filing for entire year ORD009056037 2. RCRA Site ID Number: Site Location Information Company Name: Consolidated Metco Inc Site Location: 13940 N RIVERGATE BLVD PORTLAND, OR 97203 County: MULTNOMAH Corp. Div. Reg. Nbr.: NAICS Code: Employee Count: 225 4a. Site Contact Person Name: Ernest Nimister Mailing Address: PO Box 83201 Portland, OR 97283-0201 Country: United States Phone Number (Ext): (503) 240-5493 Email Address: enimister@conmet.com 5a. Land Owner Name: Consolidated Metco, Inc.

Mailing Address: PO Box 83201

Phone Number (Ext): (503) 286-5741 Owner Type:

Country: United States

Portland, OR 97283-0201

☐ State

☐ County

☐ District ☐ Municipal ☐ Tribal

Other

Site ID

RCRA Site ID Number:

6a. Legal Owner	100	12.00	1191		3	1.	i.	7., 3.	- 34
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Owner Since:									
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7a, Site Operator	*	10	2.00 2.00 2.00					WEET.	
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Site ID

RCRA Site ID Number:

10. Hazardous Waste Activities (Mark the appropriate boxes for activities that	apply to your site)
1. Generator of Hazardous Waste a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or more than 2.2 lbs of acute hazardous waste) b. SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo or more than 2.200 lbs accumulated on-site) c. CEG: Conditionally Exempt Generator: (Generates between 0-220 lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200 lbs accumulated on-site) 2. Are you a hazardous waste generator due to remediation of environmental contamination or a business closure? Yes No If yes, find out about expedited annual reporting at: www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p 3. Importer of Hazardous Waste 4. Generator of Mixed Waste (hazardous and radioactive) 5. Transports hazardous waste generated at this facility b. Transports for commercial purposes	G. Treatment, Storage, Disposal (TSD) Facility (Note: A RCRA Permit is required for this activity) 7. Recycler of Hazardous Waste a. Recycles HW generated at this facility b. Recycles HW generated by other facilities 8. Hazardous waste management in RCRA permit exempt units (e.g. elementary neutralization units, waste water treatment units, or accumulation tanks or containers) a. Manages HW generated at this facility b. Manages HW generated by other facilities 9. Exempt Boiler and/or Industrial Furnace a. Small Quantity On-Site Burner Exemption b. Smelting, Melting, Refining Furnace Exemption 10. Underground Injection Control If yes, there may be addition reporting requirements at: www.deq.state.or.us/wq/groundwa/uichome.htm
c. Hazardous Waste Transfer Facility 11. Description of Hazardous Wastes 1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal	· · · · · · · · · · · · · · · · · · ·
(e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fee 2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Identi	
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	ny ano orogan diano diny nazarabab mada sadas dian sasa
12 Utilversal Waste Activities (Mark the appropriate boxes for activities that a	pply to your site)
□ 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) □ 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off site). If we there are additional patification.	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf	a. Batteries
3 Used Oil Activities (Mark the appropriate boxes for activities that apply to	your site)
☐ 1. Used Oil Collection Center ☐ 2. Used Oil Transporter ☐ 3. Used Oil Transfer Facility 4. Used Oil Processor/Re-refiner Indicate type(s) of activity(s) ☐ a. Processor	 □ 5. Off-Specification Used Oil Burner (not used oil space heaters operating according to CFR 279.23) 6. Used Oil Fuel Marketer Indicate type(s) of activity(s) □ a. Marketer who directs shipments of off-specification used oil to off-specification used oil burner
	b. Marketer who first claims the used oil to meet the

Site ID

RCRA Site ID Number:

14. Comments				
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15. Certification	Total Care	This form cann	not be processed without a	signature
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I certify that under penalty of law that demonstration and all attached docu obtaining the information, I believe th significant penalties for submitting fa	ments, and that, based on my i nat the submitted information is	nquiry of those individuals im- true, accurate, and complete.	mediately responsible for . I am aware that there ar	
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RCRA Waste Site Identification Form Site ID State of Oregon Department of Environmental Quality Accounting Section 811 SW Sixth Avenue, Portland, OR 97204-1390 Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511 Fax: (503)229-6977 TTY: (50)229-6993 Email: hazwaste@deg.state.or.us Department of Environmental Web site: www.DegHazWaste.net Quality ☐ To provide **New** Notification of Regulated Waste Activity (complete entire form) 1. Reason for Submittal ☐ Initial Notification (\$200 non-refundable fee required) Change in business ownership (represent the new owner) (No fee required) Reactivation of RCRA Site ID Number (\$200 non-refundable fee required) To provide **Revised** Site Identification Information ☐ To Withdraw Site Identification Number Effective Date: 01/26/2001 Completion of RCRA waste activity Change in business ownership (represent the old owner) X To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13) Reporting Year: 2000 If ownership changed: Filing for partial year |X | Filing for entire year ORD009056037 2. RCRA Site ID Number: 3a. Site Location Information Company Name: Consolidated Metco Inc Site Location: 13940 N RIVERGATE BLVD PORTLAND, OR 97203 County: MULTNOMAH Corp. Div. Reg. Nbr.: NAICS Code: Employee Count: 225 4a. Site Contact Person Name: Ernest Nimister Mailing Address: PO Box 83201 Portland, OR 97283-0201 Country: United States Phone Number (Ext): (503) 240-5493 Email Address: enimister@conmet.com Sa. Land Öwner Name: Consolidated Metco, Inc.

Mailing Address: PO Box 83201

Phone Number (Ext): (503) 286-5741 Owner Type:

Country: United States

X Private

Portland, OR 97283-0201

Federal

☐ State

☐ County

☐ District

Municipal

Tribal

Other

Site ID

RCRA Site ID Number:

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	Consolidated Metco, Inc.							
Mailing Address:		•			•			
Country	Portland, OR 97283-0201 United States							×
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Owner Since:	in the second control of the second control							
Owner Type:		☐ State	☐ County	☐ District	☐ Municipal	☐ Tribal	☐ Other	
_7a. Site Operator							11	
Name:	Consolidated Metco, Inc.		<u> </u>			•		
Mailing Address:			*					1.4
	Portland, OR 97283-0201							
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Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: 98. Hazardous Waste Fee O Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 United States							

Site ID

RCRA Site ID Number:

10 Hazardous Waste Activities (Mark the appropriate boxes for activities that	apply to your site)
1. Generator of Hazardous Waste	☐ 6. Treatment, Storage, Disposal (TSD) Facility
a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or	(Note: A RCRA Permit is required for this activity)
more than 2.2 lbs of acute hazardous waste) b. SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo	7. Recycler of Hazardous Waste
or more than 2.200 lbs accumulated on-site)	☐ a. Recycles HW generated at this facility
X c. CEG: Conditionally Exempt Generator: (Generates between 0-220 lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200	☐ b. Recycles HW generated by other facilities
ibs accumulated on-site)	8. Hazardous waste management in RCRA permit exempt
2. Are you a hazardous waste generator due to remediation	units (e.g. elementary neutralization units, waste water treatment units, or accumulation tanks or containers)
of environmental contamination or a business closure? Yes X No	a. Manages HW generated at this facility
	☐ b. Manages HW generated by other facilities
If yes, find out about expedited annual reporting at: www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p	9. Exempt Boiler and/or Industrial Furnace
☐ 3. Importer of Hazardous Waste	a. Small Quantity On-Site Burner Exemption
☐ 4. Generator of Mixed Waste (hazardous and radioactive)	☐ b. Smelting, Melting, Refining Furnace Exemption
5. Transporter of Hazardous Waste	☐ 10. Underground Injection Control
a. Transports hazardous waste generated at this facility	If yes, there may be addition reporting requirements at:
☐ b. Transports for commercial purposes	www.deq.state.or.us/wq/groundwa/uichome.htm
c. Hazardous Waste Transfer Facility	S' ' '
11 Description of Hazardous Wastes	
1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal	
(e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fed	deral codes in the comments section.
2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Ident	if the Organ state only hazardayin waste codes that heat
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12. Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to	### A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
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describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12. Universal Waste Activities (Mark the appropriate boxes for activities that a large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Collection Center 2. Used Oil Transporter 3. Used Oil Transfer Facility	## A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at:	## A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate

Site ID

RCRA Site ID Number:

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Site ID **RCRA Waste Site Identification Form** State of Oregon Department of Environmental Quality Accounting Section 811 SW Sixth Avenue, Portland, OR 97204-1390 Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511 Fax: (503)229-6977 TTY: (50)229-6993 Email: hazwaste@deg.state.or.us Department of Environmental Web site: www.DeqHazWaste.net Quality ☐ To provide New Notification of Regulated Waste Activity (complete entire form) 1. Reason for Submittal Initial Notification (\$200 non-refundable fee required) Change in business ownership (represent the new owner) (No fee required) Reactivation of RCRA Site ID Number (\$200 non-refundable fee required) To provide **Revised** Site Identification Information ☐ To Withdraw Site Identification Number Effective Date: 01/03/2002 ☐ Completion of RCRA waste activity Change in business ownership (represent the old owner) X To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13) 2001 Reporting Year: If ownership changed: Filing for entire year Filing for partial year ORD009056037 2. RCRA Site ID Number: 3a. Site Location Information Company Name: Consolidated Metco Inc Site Location: 13940 N RIVERGATE BLVD PORTLAND, OR 97203 County: MULTNOMAH Corp. Div. Reg. Nbr.; NAICS Code: Employee Count: 225 4a, Site Cont Person Name: Ernest Nimister Mailing Address: PO Box 83201 Portland, OR 97283-0201 Country: United States Phone Number (Ext): 503 240-5493 Email Address: enimister@conmer.com 5a. Land Owner. Name: Consolidated Metco, Inc. Mailing Address: PO Box 83201 Portland, OR 97283-0201 Country: United States

☐ State ☐ County

☐ District ☐ Municipal ☐ Tribal

Phone Number (Ext): (503) 286-5741 Owner Type:

X Private

Federal

Other

Site ID

RCRA Site ID Number:

6a Legal Owner					494			114	
	Consolidated Metco, Inc.				-	,			
Mailing Address:									
Country	Portland, OR 97283-0201 United States					* -			
Phone Number (Ext):				* * * * * * * * * * * * * * * * * * *					
Owner Since:									
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Owner Type.	☑ Private ☐ Federal	☐ State	☐ County	☐ District	☐ Municipal	Tribal	Other		0000
78. Site Operator			24		****	T.		4	
	Consolidated Metco, Inc.								
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	United States								
Phone Number (Ext): Operator Since:	(503) 200-5741								
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	s Conject Ernest Nimister						te la	1	
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Person Name:	Ernest Nimister Consolidated Metco Inc PO Box 83201								
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Person Name: Organization: Mailing Address: Country:	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 United States								
Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 United States 503 240-5493								
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Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 United States 503 240-5493 enimister@conmer.com								
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: 98. Hazardous Waste Fee C	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 United States 503 240-5493 enimister@conmer.com								
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: 9a. Hazardous Waste Fee C	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 United States 503 240-5493 enimister@conmer.com								
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: 9a. Hazardous Waste Fee C	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 United States 503 240-5493 enimister@conmer.com Contact Ernest Nimister Consolidated Metco Inc								
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: 9e. Hazardous Waste Fee O Person Name: Organization: Mailing Address:	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 United States 503 240-5493 enimister@conmer.com Contact Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201								
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Person Name: Organization: Mailing Address: Country:	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 United States 503 240-5493 enimister@conmer.com Contact Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 United States								
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Site ID

RCRA Site ID Number:

10. Hazardous Waste Activities (Mark the appropriate boxes for activities that	apply so your site)
1. Generator of Hazardous Waste	☐ 6. Treatment, Storage, Disposal (TSD) Facility
a LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or	(Note: A RCRA Permit is required for this activity)
more than 2.2 lbs of acute hazardous waste) b. SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo	7. Recycler of Hazardous Waste
or more than 2.200 lbs accumulated on-site)	a. Recycles HW generated at this facility
C. CEG: Conditionally Exempt Generator: (Generates between 0-220 lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200	☐ b. Recycles HW generated by other facilities
lbs accumulated on-site)	8. Hazardous waste management in RCRA permit exempt
2. Are you a hazardous waste generator due to remediation	units (e.g. elementary neutralization units, waste water treatment units, or accumulation tanks or containers)
of environmental contamination or a business closure? ☐ Yes No	☐ a. Manages HW generated at this facility
	\square b. Manages HW generated by other facilities
If yes, find out about expedited annual reporting at: www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p	9. Exempt Boiler and/or Industrial Furnace
☐ 3. Importer of Hazardous Waste	☐ a. Small Quantity On-Site Burner Exemption
☐ 4. Generator of Mixed Waste (hazardous and radioactive)	☐ b. Smelting, Melting, Refining Furnace Exemption
5. Transporter of Hazardous Waste	☐ 10. Underground Injection Control
a. Transports hazardous waste generated at this facility	If yes, there may be addition reporting requirements at:
b. Transports for commercial purposes	www.deq.state.or.us/wq/groundwa/uichome.htm
L c. Hazardous Waste Transfer Facility	
11. Description of flazardous Wastes	
1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal	
(e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fed	ieral codes in the comments section.
2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Identi	fy the Oregon state-only hazardous waste codes that best
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	
The Addition Section 2 Constitution of the Con	
22. Universal Waste Activities (Mark tile appropriate boxes for activities that a	THE NAME OF THE PROPERTY AND ADDRESS OF THE PARTY OF THE
1. Large Quantity Handler of Universal Waste	☐ 4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes
(Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated)	on-site)
2. Off-site Universal Waste Collection Site	5. Mark all boxes that apply
(Accumulates a total of 2,000 lbs. or more of universal waste	Generate Accumulate
received from off-site). If yes, there are additional notification requirements at:	
www.deq.state.or.us/wmc/documents/uwnotification.pdf	a. Batteries
3. Pesticide Collection Program	c. Lamps
(Collects and accumulates waste pesticides from off-site). If	
yes, there are additional notification requirements at: www.deg.state.or.us/wmc/documents/uwnotification.pdf	d. Pesticides
13. Used Oil Activities (Mark the appropriate boxes for activities that apply to	your site)
1. Used Oil Collection Center	
Used Oil Transporter	' 5 Ott-Specification (lead Oil Burner (not used oil space
3. Used Oil Transfer Facility	
4. Used Oil Processor/Re-refiner	heaters operating according to CFR 279.23)
4. Used Oil Processor/Re-refiner	heaters operating according to CFR 279.23) 6. Used Oil Fuel Marketer Indicate type(s) of activity(s) a. Marketer who directs shipments of off-specification used oil
	heaters operating according to CFR 279.23) 6. Used Oil Fuel Marketer Indicate type(s) of activity(s)

Site ID

RCRA Site ID Number:

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I certify that und demonstration a obtaining the inf significant penal Signature Name (print or the species of	and all attache formation, I be lties for subm type) al accommoda 3-229-6938 or 1	ed documents, elieve that the s itting false info	and that, based submitted inforr rmation, includi	d on my inquiry mation is true, a ing the possibili — — — entin an alternati	familiar with the of those individual courate, and country of fine and in Date	e information suduals immediate omplete. I am amprisonment.	ibmitted in	n this sible for there are		

RCRA Waste Site Identification Form Site ID State of Oregon Department of Environmental Quality Accounting Section 811 SW Sixth Avenue, Portland, OR 97204-1390 Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511 Fax: (503)229-6977 TTY: (50)229-6993 Email: hazwaste@deg.state.or.us Department of Environmental Quality Web site: www.DegHazWaste.net ☐ To provide **New** Notification of Regulated Waste Activity (complete entire form) 1. Reason for Submittal ☐ Initial Notification (\$200 non-refundable fee required) ☐ Change in business ownership (represent the new owner) (No fee required) Reactivation of RCRA Site ID Number (\$200 non-refundable fee required) To provide **Revised** Site Identification Information To Withdraw Site Identification Number Effective Date: 01/09/2003 ☐ Completion of RCRA waste activity Change in business ownership (represent the old owner) X To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13) Reporting Year: 2002 Filing for partial year If ownership changed: | Filing for entire year ORD009056037 2. RCRA Site ID Number: Sa. Site Location Information Company Name: Consolidated Metco Inc Site Location: 13940 N RIVERGATE BLVD PORTLAND, OR 97203 County: MULTNOMAH Corp. Div. Reg. Nbr.: NAICS Code: Employee Count: 225 4a. Site Contact Person Name: Ernest Nimister Mailing Address: PO Box 83201 Portland, OR 97283-0201 Country: United States Phone Number (Ext): 503 240-5493 Email Address: enimister@conmer.com Name: Consolidated Metco, Inc. Mailing Address: PO Box 83201

Portland, OR 97283-0201

☐ Federal

☐ State

☐ County

☐ District ☐ Municipal ☐ Tribal

Country: United States

X Private

Phone Number (Ext): (503) 286-5741 Owner Type:

Other

Site ID

RCRA Site ID Number:

69.	Legal Owner West					= 77			
	Mailing Address:	Portland, OR 97283-02 United States (503) 286-5741							
	Owner Type:	X Private	deral 🗌 State	County	☐ District	☐ Municipal	Tribal	Other	
78	Mailing Address:	Consolidated Metco, In PO Box 83201 Portland, OR 97283-02 United States (503) 286-5741		☐ County	☐ District	☐ Municipal	□ Tribal	Other	
Sa.	Hazardous Waste Form	e Contact	1				34.	-12	
8a.	Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-02 United States	01				柳		
	Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-02 United States 503 240-5493 enimister@conmer.com	01						

Site ID

RCRA Site ID Number:

10. Hazardous Waste Activities (Mark the appropriate boxes for activities that	apply to your site)
Generator of Hazardous Waste a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or	☐ 6. Treatment, Storage, Disposal (TSD) Facility (Note: A RCRA Permit is required for this activity)
more than 2.2 lbs of acute hazardous waste) b. SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo or more than 2.200 lbs accumulated on-site)	7. Recycler of Hazardous Waste a. Recycles HW generated at this facility
X c. CEG: Conditionally Exempt Generator: (Generates between 0-220 lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200 lbs accumulated on-site)	 b. Recycles HW generated by other facilities 8. Hazardous waste management in RCRA permit exempt units (e.g. elementary neutralization units, waste water
Are you a hazardous waste generator due to remediation of environmental contamination or a business closure? Yes No	treatment units, or accumulation tanks or containers) a. Manages HW generated at this facility
াf yes, find out about expedited annual reporting at:	\square b. Manages HW generated by other facilities
www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p	9. Exempt Boiler and/or Industrial Furnace
☐ 3. Importer of Hazardous Waste	a. Small Quantity On-Site Burner Exemption
4. Generator of Mixed Waste (hazardous and radioactive)	□ b. Smelting, Melting, Refining Furnace Exemption □ to Medical Account to Section
Transporter of Hazardous Waste a. Transports hazardous waste generated at this facility	10. Underground Injection Control
b. Transports for commercial purposes	If yes, there may be addition reporting requirements at: www.deq.state.or.us/wq/groundwa/uichome.htm
☐ c. Hazardous Waste Transfer Facility	
11. Description of Hazardous Wastes	
1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal (e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional federal	
 Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Ident describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 	ify the Oregon state-only hazardous waste codes that best
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12. Universal Waste Activities (Mark the appropriate boxes for activities that a	pply to your sits) 2 2 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
1. Large Quantity Handler of Universal Waste	4. Destination Facility for Universal Waste
(Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated)	(A facility that treats, disposes of, or recycles universal wastes on-site)
2. Off-site Universal Waste Collection Site	5. Mark all boxes that apply
(Accumulates a total of 2,000 lbs. or more of universal waste	<u>Generate</u> <u>Accumulate</u>
received from off-site). If yes, there are additional notification requirements at:	a. Batteries
www.deq.state.or.us/wmc/documents/uwnotification.pdf	b. Mercury containing thermostats
☐ 3. Pesticide Collection Program	c. Lamps
(Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at:	d. Pesticides
www.deq.state.or.us/wmc/documents/uwnotification.pdf	<u> </u>
13 Used Oil Activities (Mark the appropriate boxes for activities that apply to	your site); 1
☐ 1. Used Oil Collection Center	☐ 5. Off-Specification Used Oil Burner (not used oil space
☐ 2. Used Oil Transporter	heaters operating according to CFR 279.23)
☐ 3. Used Oil Transfer Facility	6. Used Oil Fuel Marketer
4. Used Oil Processor/Re-refiner	Indicate type(s) of activity(s)
Indicate type(s) of activity(s)	☐ a. Marketer who directs shipments of off-specification used oil to off-specification used oil burner
☐ a. Processor	b. Marketer who first claims the used oil to meet the
☐ b. Re-refiner	specifications

Site ID

RCRA Site ID Number:

14. Comments				
			÷	
15. Certification		This form cannot l	e processed without a s	ignature
I certify that under penalty of law that I have personally ex demonstration and all attached documents, and that, base obtaining the information, I believe that the submitted info significant penalties for submitting false information, inclu-	ed on my inquiry of those ormation is true, accurate,	individuals immed and complete. I a	liately responsible for m aware that there are	
Signature		Date		
Name (print or type)		Title		
If you have special accommodation needs or require this docu in Portland at 503-229-6938 or toll-free within the State of Ore			e Hazardous Waste Secti	on
	gon at 1-800-452-4011, exte	ension 6938		
16. Electronic Submittals	gon at 1-800-452-4011, exte	ension 6938		

RCRA Waste Site Identification Form Site ID State of Oregon Department of Environmental Quality Accounting Section 811 SW Sixth Avenue, Portland, OR 97204-1390 Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511 Fax: (503)229-6977 TTY: (50)229-6993 Email: hazwaste@deq.state.or.us Department of Environmental Web site: www.DegHazWaste.net Quality 1. Reason for Submittal ☐ To provide **New** Notification of Regulated Waste Activity (complete entire form) Initial Notification (\$200 non-refundable fee required) Change in business ownership (represent the new owner) (No fee required) Reactivation of RCRA Site ID Number (\$200 non-refundable fee required) To provide **Revised** Site Identification Information ☐ To Withdraw Site Identification Number Effective Date: 12/31/2003 Completion of RCRA waste activity Change in business ownership (represent the old owner) X To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13) 2003 Reporting Year: If ownership changed: |X | Filing for entire year Filing for partial year 2. RCRA Site ID Number: ORD009056037 3a Site Location Information Company Name: Consolidated Metco Inc Site Location: 13940 N RIVERGATE BLVD PORTLAND, OR 97203 County: MULTNOMAH Corp. Div. Reg. Nbr.: 007910-20 NAICS Code: 331524 Employee Count: 225 4a. Site Contact Person Name: Ernest Nimister Mailing Address: PO Box 83201 Portland, OR 97283-0201 Country: UNITED STATES Phone Number (Ext): (503) 240-5493 Email Address: enimister@conmet.com Sa. Land Owner

Name: Consolidated Metco, Inc.

Private

Country: UNITED STATES

Portland, OR 97283-0201

☐ Federal

☐ State

☐ County

☐ District ☐ Municipal ☐ Tribal

Mailing Address: PO Box 83201

Phone Number (Ext): (503) 286-5741 Owner Type:

Other

Site ID

RCRA Site ID Number:

6a. Legal Gwner		77				1		
Name: Mailing Address:	Consolidated Metco, Inc. PO Box 83201 Portland, OR 97283-0201						· ·	
	UNITED STATES							
Phone Number (Ext): Owner Since:	the second secon							
Owner Type:		☐ State	☐ County	☐ District	☐ Municipal	☐Tribal	☐ Other	
	ZI FIIVALE LI TECETAL	State	County	District	□ Municipal		Other -	
7a. Site Operator		78 74	4, ,	*	7214			7.7
Name: Mailing Address:	Consolidated Metco, Inc. PO Box 83201					•		
	Portland, OR 97283-0201 UNITED STATES							
Phone Number (Ext):		-		:				
Operator Since: Operator Type:		State	□ County	☐ District	☐ Municipal	Tribal	Other	
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Person Name: Organization:	Ernest Nimister Consolidated Metco Inc						The state of the s	
Person Name: Organization: Mailing Address:	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201							
Person Name: Organization: Mailing Address: Country:	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 UNITED STATES							
Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 UNITED STATES						t e	
Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 UNITED STATES (503) 240-5493 enimister@conmet.com							Article Control of the Control of th
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: 9a. Hazardous Waste Fee (Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 UNITED STATES (503) 240-5493 enimister@conmet.com Contact Ernest Nimister Consolidated Metco Inc							
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Person Name: Organization: Mailing Address:	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 UNITED STATES (503) 240-5493 enimister@conmet.com Contact Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 UNITED STATES							

Site ID

RCRA Site ID Number:

10. Hazardoùs Waste Activities (Mark the appropriate boxes for activities that	apply to your site)
1. Generator of Hazardous Waste a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or more than 2.2 lbs of acute hazardous waste) b. SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo or more than 2.200 lbs accumulated on-site) c. CEG: Conditionally Exempt Generator: (Generates between 0-220 lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200 lbs accumulated on-site) 2. Are you a hazardous waste generator due to remediation of environmental contamination or a business closure? Yes No If yes, find out about expedited annual reporting at: www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p 3. Importer of Hazardous Waste 4. Generator of Mixed Waste (hazardous and radioactive) 5. Transporter of Hazardous waste generated at this facility	☐ 6. Treatment, Storage, Disposal (TSD) Facility (Note: A RCRA Permit is required for this activity) 7. Recycler of Hazardous Waste ☐ a. Recycles HW generated at this facility ☐ b. Recycles HW generated by other facilities 8. Hazardous waste management in RCRA permit exempt units (e.g. elementary neutralization units, waste water treatment units, or accumulation tanks or containers) ☐ a. Manages HW generated at this facility ☐ b. Manages HW generated by other facilities 9. Exempt Boiler and/or Industrial Furnace ☐ a. Small Quantity On-Site Burner Exemption ☐ b. Smelting, Melting, Refining Furnace Exemption ☐ 10. Underground Injection Control If yes, there may be addition reporting requirements at:
□ b. Transports for commercial purposes □ c. Hazardous Waste Transfer Facility 11. Pescription of Hazardous Wastes 1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal	www.deq.state.or.us/wq/groundwa/uichome.htm
(e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fee 2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Ident describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	deral codes in the comments section.
312 Universal Waste Activities Mark the appropriate boxes for activities that a	
☐ 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) ☐ 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf ☐ 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at:	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries
www.deq.state.or.us/wmc/documents/uwnotification.pdf 13 Leed Oil Activities (Mark the aspropriate boxes for activities that apply to	
2. Used Oil Transporter 3. Used Oil Transfer Facility 4. Used Oil Processor/Re-refiner	heaters operating according to CFR 279.23) 6. Used Oil Fuel Marketer Indicate type(s) of activity(s) a. Marketer who directs shipments of off-specification used oil
Indicate type(s) of activity(s) ☐ a. Processor ☐ b. Re-refiner	to off-specification used oil burner b. Marketer who first claims the used oil to meet the specifications

Site ID

RCRA Site ID Number:

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15 Certification	200	7.2		This form cannot	be processed v	vithout a signature	9
demonstration and all atta obtaining the information, significant penalties for su	I believe that the	submitted inform	ation is true, accura	ate, and complete. I	am aware that		
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Signature				Date	 		
Signature				Date			· ————————————————————————————————————
Signature Name (print or type)				Date Title			·
Name (print or type) If you have special accomm in Portland at 503-229-6938				Title	he Hazardous W	/aste Section	
Name (print or type) If you have special accomm	3 or toll-free within t	the State of Oregon	n at 1-800-452-4011,	Title rmat, please contact t extension 6938		***	

RCRA Waste Site Identification Form Site ID State of Oregon Department of Environmental Quality Accounting Section 811 SW Sixth Avenue, Portland, OR 97204-1390 Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511 Fax: (503)229-6977 TTY: (50)229-6993 Email: hazwaste@deq.state.or.us Department of Environmental Web site: www.DegHazWaste.net ☐ To provide **New** Notification of Regulated Waste Activity (complete entire form) 1. Reason for Submittal Initial Notification (\$200 non-refundable fee required) Change in business ownership (represent the new owner) (No fee required) Reactivation of RCRA Site ID Number (\$200 non-refundable fee required) ☐ To provide **Revised** Site Identification Information To Withdraw Site Identification Number Effective Date: 12/31/2004 Completion of RCRA waste activity Change in business ownership (represent the old owner) X To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13) 2004 Reporting Year: If ownership changed: Filing for entire year Filing for partial year ORD009056037 2. RCRA Site ID Number: 3a. Sile Location Information Company Name: Consolidated Metco Inc Site Location: 13940 N RIVERGATE BLVD. PORTLAND, OR 97203 County: MULTNOMAH Corp. Div. Reg. Nbr.: 007910-20 NAICS Code: 331524 Employee Count: 225 4a: Site Contact Person Name: Ernest Nimister Mailing Address: PO Box 83201 Portland, OR 97283-0201 Country: UNITED STATES

Mailii

5a, Land Owner

Name: Consolidated Metco, Inc.

Mailing Address: PO Box 83201

Phone Number (Ext): (503) 240-5493

Portland, OR 97283-0201

Country: UNITED STATES

Email Address: enimister@conmet.com

Phone Number (Ext): (503) 286-5741

Owner Type: 🛛 Private 🗌 Federal 🔲 State 🔲 County 🗎 District 🗀 Municipal 📋 Tribal 🗀 Other

Site ID

RCRA Site ID Number:

6a. Legal Owner	N. T. State of the A.	100 March 200						
Mailing Address: Country:	Portland, OR 97283-0201 UNITED STATES							
Phone Number (Ext):								
Owner Since:				: <u>_</u> :			_	
Owner Type:	🛚 Private 🗌 Federal	☐ State	County	☐ District	☐ Municipal	Tribal	☐ Other	
7a. Site Operator		and the same of		1.1			4	141
Name: Mailing Address:								
Country: Phone Number (Ext):	Portland, OR 97283-0201 UNITED STATES (503) 286-5741							
Operator Since:								
Operator Type:	🛚 Private 🗌 Federal	☐ State	☐ County	☐ District	☐ Municipal	☐Tribal	Other	
			and the same of th					
Ba Hazardous Wäste Form	is Contact				4 3		115	事1.19
Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 UNITED STATES							
Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	Ernest Nimister Consolidated Metco Inc PO Box 83201 Portland, OR 97283-0201 UNITED STATES (503) 240-5493 enimister@conmet.com							

Site ID

RCRA Site ID Number:

	apply to your site)
1. Generator of Hazardous Waste	6. Treatment, Storage, Disposal (TSD) Facility
a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or	(Note: A RCRA Permit is required for this activity)
more than 2.2 lbs of acute hazardous waste) No. SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo	7. Recycler of Hazardous Waste
or more than 2.200 lbs accumulated on-site)	a. Recycles HW generated at this facility
c. CEG: Conditionally Exempt Generator: (Generates between 0-220	☐ b. Recycles HW generated by other facilities
lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200 lbs accumulated on-site)	8. Hazardous waste management in RCRA permit exempt
2. Are you a hazardous waste generator due to remediation	units (e.g. elementary neutralization units, waste water
of environmental contamination or a business closure?	treatment units, or accumulation tanks or containers) a. Manages HW generated at this facility
Yes X No	□ b. Manages HW generated by other facilities
If yes, find out about expedited annual reporting at: www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p	9. Exempt Boiler and/or Industrial Furnace
☐ 3. Importer of Hazardous Waste	a. Small Quantity On-Site Burner Exemption
☐ 4. Generator of Mixed Waste (hazardous and radioactive)	☐ b. Smelting, Melting, Refining Furnace Exemption
5. Transporter of Hazardous Waste	☐ 10. Underground Injection Control
a. Transports hazardous waste generated at this facility	If yes, there may be addition reporting requirements at:
☐ b. Transports for commercial purposes	www.deq.state.or.us/wq/groundwa/uichome.htm
C. Hazardous Waste Transfer Facility	
11. Description of Hazardous Wastes	
1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal	
(e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fed	deral codes in the comments section.
D001, D008	
2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Identi	fy the Oregon state-only hazardous waste codes that best
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	
12. Universal Waste Activities (Mark the appropriate boxes for activities that a	polý to your site) 🏃
1. Large Quantity Handler of Universal Waste	
(Accumulates a total of 11,000 lbs. or more of universal waste	4. Destination Facility for Universal Waste
,	(A facility that treats, disposes of, or recycles universal wastes
at any time, at the location at which it was generated)	
•	(A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply
at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification	(A facility that treats, disposes of, or recycles universal wastes on-site)
at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at:	(A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries
at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification	(A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries X X b. Mercury containing thermostats X
at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf	(A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries X X b. Mercury containing thermostats X — — c. Lamps X — —
at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at:	(A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries X X b. Mercury containing thermostats X
at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf	(A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries X X b. Mercury containing thermostats c. Lamps X d. Pesticides
at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to	(A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries X X b. Mercury containing thermostats c. Lamps X d. Pesticides — —
at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to	(A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries X X b. Mercury containing thermostats c. Lamps d. Pesticides
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at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to 1. Used Oil Collection Center 2. Used Oil Transporter 3. Used Oil Transfer Facility	(A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries
at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to 1. Used Oil Collection Center 2. Used Oil Transporter 3. Used Oil Transfer Facility 4. Used Oil Processor/Re-refiner	(A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries X X b. Mercury containing thermostats c. Lamps d. Pesticides
at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to 1. Used Oil Collection Center 2. Used Oil Transporter 3. Used Oil Transfer Facility 4. Used Oil Processor/Re-refiner Indicate type(s) of activity(s)	(A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries
at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply to 1. Used Oil Collection Center 2. Used Oil Transporter 3. Used Oil Transfer Facility 4. Used Oil Processor/Re-refiner	(A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries

Site ID

RCRA Site ID Number:

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certify that under pend emonstration and all a btaining the informatio	attached document on, I believe that th	ts, and that, based e submitted inform	d on my inquiry of t mation is true, accເ	niliar with the info those individuals urate, and comple	immediately resp ete. I am aware th	d in this consible for	nature
certify that under pend emonstration and all a btaining the informatio	attached document on, I believe that th	ts, and that, based e submitted inform	d on my inquiry of t mation is true, accເ	niliar with the info those individuals urate, and comple	rmation submitte immediately resp ete. I am aware tl	d in this consible for	nature
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certification certify that under pend emonstration and all a btaining the informatio ignificant penalties for	attached document on, I believe that th	ts, and that, based e submitted inform	d on my inquiry of t mation is true, accເ	niliar with the info those individuals urate, and complo of fine and impriso	rmation submitte immediately resp ete. I am aware tl	d in this consible for	nature
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Site ID **RCRA Waste Site Identification Form** State of Oregon Department of Environmental Quality Accounting Section 811 SW Sixth Avenue, Portland, OR 97204-1390 Questions: (503)229-6511 in Portland, OR or toll free in Oregon: (800)452-4011 Ext. 6511 Fax: (503)229-6977 TTY: (50)229-6993 Email: hazwaste@deq.state.or.us Environmental Web site: www.DegHazWaste.net Quality ☐ To provide **New** Notification of Regulated Waste Activity (complete entire form) 1. Reason for Submittal Initial Notification (\$200 non-refundable fee required) Change in business ownership (represent the new owner) (No fee required) Reactivation of RCRA Site ID Number (\$200 non-refundable fee required) X To provide Revised Site Identification Information To Withdraw Site Identification Number Effective Date: 01/06/2006 Completion of RCRA waste activity Change in business ownership (represent the old owner) To provide as a component of the Annual Hazardous Waste Report (skip section 11, 12, and 13) Reporting Year: If ownership changed: Filing for entire year Filing for partial year 2. RCRA Site ID Number: ORD009056037 3a. Site Location Information Company Name: Consolidated Metco Inc Site Location: 13940 N RIVERGATE BLVD PORTLAND, OR 97203 County: MULTNOMAH Corp. Div. Reg. Nbr.: 007910-20 NAICS Code: 331524 Employee Count: 225 4a/Site Contact Person Name: Ernest Nimister Mailing Address: PO Box 83201 Portland, OR 97283-0201 Country: UNITED STATES Phone Number (Ext): (503) 240-5493 Email Address: enimister@conmet.com

6a Land Owner

Name: Consolidated Metco, Inc.

X Private

Country: UNITED STATES

Portland, OR 97283-0201

☐ Federal

☐ State

☐ County

☐ District

Municipal

Mailing Address: PO Box 83201

Phone Number (Ext): (503) 286-5741

Owner Type:

Other

Tribal

Site ID

RCRA Site ID Number:

6a Legal Owner 🎨 ガス		74	T. (56)		Alega Park	44	V.,	1	744) 710
	Consolidated Metco, In	Inc.							
Mailing Address:	PO Box 83201 Portland, OR 97283-0	1201					•		
Country:	UNITED STATES	201							
Phone Number (Ext):	(503) 286-5741								
Owner Since:	06/01/1964								
Owner Type:	🛚 Private 🔲 Fe	ederal \Box	State	County	☐ District	☐ Municipal	Tribal	Other	
7a, Site Operator	St.	ň	i.	1			E 1	4	
	Consolidated Metco, I	Inc.							
Mailing Address:	PO Box 83201 Portland, OR 97283-0	1204							
Country:	UNITED STATES	1201							
Phone Number (Ext):							<i>f</i>		· Y
Operator Since:								•	
Operator Type:	☑ Private ☐ F	ederal 🗌	State [☐ County	☐ District	☐ Municipal	Tribal	Other	
8a. Hazardous Waste Form	is Contact			<u> </u>		- 阿罗里		**	- 10 M
Person Name:	Ernest Ņimister			4	**		784		A CONTRACTOR OF THE PARTY OF TH
Person Name: Organization:	Ernest Nimister Consolidated Metco Ir	nc				型。 一次,由一次			**************************************
Person Name:	Ernest Nimister Consolidated Metco Ir			4					
Person Name: Organization: Mailing Address:	Ernest Nimister Consolidated Metco Ir PO Box 83201						No.		
Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	Ernest Nimister Consolidated Metco Ir PO Box 83201 Portland, OR 97283-0 UNITED STATES (503) 240-5493	0201							
Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	Ernest Nimister Consolidated Metco Ir PO Box 83201 Portland, OR 97283-0 UNITED STATES	0201					T Sta		
Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	Ernest Nimister Consolidated Metco Ir PO Box 83201 Portland, OR 97283-0 UNITED STATES (503) 240-5493 enimister@conmet.co	0201							
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: 9a: Hazardous Waste Pool	Ernest Nimister Consolidated Metco In PO Box 83201 Portland, OR 97283-0 UNITED STATES (503) 240-5493 enimister@conmet.co	0201 om							
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: 9a. Hazardous Waste Factorial Person Name: Organization:	Ernest Nimister Consolidated Metco In PO Box 83201 Portland, OR 97283-0 UNITED STATES (503) 240-5493 enimister@conmet.co Contact Ernest Nimister Consolidated Metco In	0201 om							
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: 9a: Hazardous Waste Pool	Ernest Nimister Consolidated Metco Ir PO Box 83201 Portland, OR 97283-0 UNITED STATES (503) 240-5493 enimister@conmet.co Consolidated Metco Ir PO Box 83201	0201 om nc							
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: 9a. Hazardous Waste Facility Person Name: Organization: Mailing Address:	Ernest Nimister Consolidated Metco In PO Box 83201 Portland, OR 97283-0 UNITED STATES (503) 240-5493 enimister@conmet.co Contact Ernest Nimister Consolidated Metco In	0201 om nc							
Person Name: Organization: Mailing Address: Country: Phone Number (Ext): Email Address: Person Name: Organization: Mailing Address: Country: Phone Number (Ext):	Ernest Nimister Consolidated Metco In PO Box 83201 Portland, OR 97283-0 UNITED STATES (503) 240-5493 enimister@conmet.co Contact Ernest Nimister Consolidated Metco In PO Box 83201 Portland, OR 97283-0 UNITED STATES	0201 om one 0201							

Site ID

RCRA Site ID Number:

10. Hazardous Waste Activities (Mark the appropriate poxes for activities that	apply to your site)
1. Generator of Hazardous Waste	☐ 6. Treatment, Storage, Disposal (TSD) Facility
a. LQG: Large Quantity Generator (Generates greater than 2,200 lbs/mo or	(Note: A RCRA Permit is required for this activity)
more than 2.2 lbs of acute hazardous waste) b. SQG: Small Quantity Generator: (Generates between 220-2,200 lbs/mo	7. Recycler of Hazardous Waste
or more than 2.200 lbs accumulated on-site)	☐ a. Recycles HW generated at this facility
X c. CEG: Conditionally Exempt Generator: (Generates between 0-220 lbs/mo, less than 2.2 lbs of acute hazardous waste and less than 2,200	b. Recycles HW generated by other facilities
lbs accumulated on-site)	8. Hazardous waste management in RCRA permit exempt
2. Are you a hazardous waste generator due to remediation	units (e.g. elementary neutralization units, waste water treatment units, or accumulation tanks or containers)
of environmental contamination or a business closure?	☐ a. Manages HW generated at this facility
☐ Yes 🛣 No	☐ b. Manages HW generated by other facilities
If yes, find out about expedited annual reporting at: www.deq.state.or.us/wmc/hw/factsheets/HWFeesForCleanups.p	9. Exempt Boiler and/or Industrial Furnace
☐ 3. Importer of Hazardous Waste	a. Small Quantity On-Site Burner Exemption
☐ 4. Generator of Mixed Waste (hazardous and radioactive)	☐ b. Smelting, Melting, Refining Furnace Exemption
5. Transporter of Hazardous Waste	☐ 10. Underground injection Control
a. Transports hazardous waste generated at this facility	If yes, there may be addition reporting requirements at:
b. Transports for commercial purposes	www.deq.state.or.us/wq/groundwa/uichome.htm
c. Hazardous Waste Transfer Facility	
11. Description of Hazardous Wastes	学,是一个文章,但是 对 他们是第二个文章。
1. Waste Codes for Federally Regulated Hazardous Wastes: Identify the federal	
(e.g., D001 - Ignitable, D002 - Corrosive, D003 - Reactive, etc.) List additional fed	derail codes in the comments section.
2. Waste Codes for State Regulated(i.e., non-federal) Hazardous Wastes: Identi	fy the Oregon state-only hazardous waste codes that best
	*· · · · · · · · · · · · · · · · · · ·
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.)	
describe your waste (e.g., ORX001, ORX007, ORP003, ORU001, etc.) 12. Utilversal Waste Activities (Mark the appropriate boxes for activities that a	pply (o your slet)
12. Utilversal Waste Activities (Mark the appropriate boxes for activities that a	4. Destination Facility for Universal Waste
12. Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste	A. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes
12. Universal Waste Activities (Mark the appropriate poxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated)	4. Destination Facility for Universal Waste
12. Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) Mark all boxes that apply
12. Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site)
12. Universal Waste Activities (Mark the appropriate boxes for activities that a	☐ 4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries
12. Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
12. Universal Waste Activities (Mark the appropriate boxes for activities that a	☐ 4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries
12. Universal Waste Activities (Mark the appropriate Boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at:	□ 4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★ ★
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12. Universal Waste Activities (Mark the appropriate Soxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
12. Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply (c) 14. Used Oil Collection Center 2. Used Oil Transporter	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
12. Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Used Oil Activities (Mark the appropriate boxes for activities that apply (o	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate a. Batteries X X X b. Mercury containing thermostats c. Lamps X C d. Pesticides C 5. Off-Specification Used Oil Burner (not used oil space heaters operating according to CFR 279.23) 6. Used Oil Fuel Marketer
12. Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 13. Used Oil Activities (Mark the appropriate boxes for activities that apply (c) 14. Used Oil Collection Center 2. Used Oil Transporter	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
12. Utiliversal Waste Activities (Mark the appropriate boxes for activities that a large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Used Oil Activities (Mark the appropriate hoxes for activities that apply for 1. Used Oil Collection Center 2. Used Oil Transporter 3. Used Oil Transfer Facility 4. Used Oil Processor/Re-refiner Indicate type(s) of activity(s)	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate
12. Universal Waste Activities (Mark the appropriate boxes for activities that a 1. Large Quantity Handler of Universal Waste (Accumulates a total of 11,000 lbs. or more of universal waste at any time, at the location at which it was generated) 2. Off-site Universal Waste Collection Site (Accumulates a total of 2,000 lbs. or more of universal waste received from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Pesticide Collection Program (Collects and accumulates waste pesticides from off-site). If yes, there are additional notification requirements at: www.deq.state.or.us/wmc/documents/uwnotification.pdf 3. Used Oil Activities (Mark the appropriate foxes for activities that apply to 1. Used Oil Collection Center 2. Used Oil Transporter 3. Used Oil Transfer Facility 4. Used Oil Processor/Re-refiner	4. Destination Facility for Universal Waste (A facility that treats, disposes of, or recycles universal wastes on-site) 5. Mark all boxes that apply Generate Accumulate

Site ID

RCRA Site ID Number:

14. Comments	Alan A		7		8 BA	- 14		1
						•		
15. Certification					rm cannot be pr			· · · · · · · · · · · · · · · · · · ·
I certify that under penalty	v of law that I I	nave personally e	xamined and am	familiar with the	e information su	bmitted in this	ŝ	
I certify that under penalty demonstration and all atte obtaining the information, significant penalties for st	ached docume I believe that	nts, and that, bas the submitted info	ed on my inquiry ormation is true, a	of those individual of the courate, and co	luals immediate omplete. I am a	ly responsible	for	
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demonstration and all atte obtaining the information, significant penalties for so Signature Name (print or type) If you have special accomm	ached docume I believe that ubmitting false	nts, and that, bas the submitted info information, inclu information, inclu or require this docu	ed on my inquiry ormation is true, a ading the possibil	y of those individ accurate, and co lity of fine and in Date Title	luals immediate omplete. I am a apprisonment.	ly responsible ware that there	for e are	

Registration Verification Report '94



This report is for DEQ/EPA ID ORD009056037 assigned to Consolidated Metco Inc. located at 13940 N RIVERGATE BLVD, PORTLAND 97203 in MULTNOMAH county.

Did the owner	rship of this facility CHA	NGE in calendar	year 19	194? NO 🇯	X		
				YES	Date:		
	The MAILING ADDRESS Consolidated Metco Inc PO Box 83201	of this facility	is:		·		
City:	Portland	State: OR	ZIP:	97283-020	1		
	The LEGAL OWNER of the Consolidated Metco, Inc.	his facility is					
1	13940 North Rivergate Bo	ulevard	Phone:	(503) 286-5	741		
City:	Portland	State: OR	ZIP:	97203			
ť	The OPERATOR of this f	•	Contact:				
	13940 North Rivergate Bo			(503) 286-5	741		
City:	Portland	State: OR	ZIP:	97203		*.	
Name:	The OWNER of the LANG Consolidated Metco, Inc. 13940 North Rivergate Bo		•	is located is (503) 286-5			
City:	Portland	State: OR	ZIP:	97203			
Organization: Address:	The BILLING ADDRESS to Consolidated Metco Inc 13940-N Rivergate BIVd Portland		Contact: Phone:	Ernest Nimis	ster 493		
	The contact for SITE VIS Brice Barker / Plant Mgr	SITS and INSPE		for this faci 503 286 57			
·	The contact for QUESTIC Ernest Nimister / Manager				493		
3365 ALUMI	Industrial Classification (NUM FOUNDRIES le is UNKNOWN or NOT				acility's oper	ations is:	
	this facility reported the ople were employed in 1			loyees as	From 1 to 50	- 51 cl mc	39.
This facility la	Hazardοι st reported its generator	us Waste General			Quantity Gen	erator	
Check the app	propriate box below to in uantity Generator	dicate this facili	ty's gen	erator statu	s for calendar		or,

1.	Does this facility recycle hazardous waste generated on site? YES NOIf your answer is no, skip to question 2.
	If your answer is yes, what type of recycling activities occur at your facility? (Check as many boxes as appropriate.)
	use as an ingredient in a process use as a substitute as a commercial chemical product solvent recycling acid regeneration
	precious metal recovery energy recovery
	other
2.	Is this facility a designated recycling facility receiving waste from offsite for recycling YES NOIf your answer is no, skip to question 3.
	If your answer is yes, what type of recycling activities occur at your facility? (Check as many boxes as appropriate.)
	use as an ingredient in a process use as a substitute as a commercial chemical product solvent recycling acid regeneration precious metal recovery energy recovery other
3.	Is this facility a generator that treats in accumulation tanks or containers? YES NOIf your answer is no, skip to certification statement.
	If your answer is yes, what type of recycling activities occur at your facility? (Check as many boxes as appropriate.)
	solidification neutralization chemical precipitation stabilization settling/clarification other
this obt	ertify under penalty of law that I have personally examined and am familiar with the information submitted in a and all attached documents, and that, based on my inquiry of those individuals immediately responsible for taining the information, I believe that the submitted information is true, accurate, and complete. I am aware at there are significant penalties for submitting false information, including the possibility of fine, or imprisonnt.
/	5 mtm. Jumid 9 - FEB. 1, 1995
Sig	nature Date
	ERNEST M. NIMISTER. MGR. ENVIRONMENTAL COMPTIONCE & SAFETY
Nar	me (please print) Title 7

1994 Waste Generation & Management—Answer Sheet

PLEASE ENTER:

Facility name: Consolidated Metco, Inc.

EPA ID number: ORD009056037

Note: Make as many two-sided copies of the answer sheet as you need BEFORE anwering any questions. REVIEW QUESTIONS ON PAGES 9-12 BEFORE COMPLETING ANSWER SHEET.

PLEASE TYPE ALL FORMS. FOR EASE OF TYPING, SET LINE SPACING TO 1 1/2.

	•	easing agent) from aluminum permanent
mold casting operation. (Sele	enium, Boron	Nitrate)
2. EPA Codes D010		
3. State Only Code OR	4. SIC Code3	365 5. Mixed Radioactive? ■ No □ Yes
6. Source Code A 29		7. Form Code <u>B403</u>
8. Waste Origin 1 🖾 2 🗇 3 🗇	4 🗇	8 A. Residual Management M
9. Reported Toxic Substances in Waste?	1 🖾 2 🗇	3 🗇
9A. CAS Number		
10. Point of Measurement or Calculation	1 🗇 🛒 2 🗇	3 🖾 4 🗇
11. Quantity Generated 800		
Unit of Measure P 🗷 G 🗖 ST 🗖	COKO	LO MTO
11A. Density 🗇 Pou	ınds/gallon	☐ Specific gravity ☐ Pounds/cubic yard
12. Managed On or Off-site? 🗖 On-site	☑ Off-site	☐ Both On-site & Off-site
13. Quantity	·	Management Code
If any of this waste stream was shipped on sheet.	off-site in 1994, g	give details of each shipment on the back of this answer
	off-site in 1994, g	give details of each shipment on the back of this answer
sheet.	off-site in 1994, g	give details of each shipment on the back of this answer
sheet. Comments:		
comments: 6. The surface coating is utili	zed in an alı	uminum foundry as a releasing agent
Comments: 6. The surface coating is utili from permanent molds (steel)	zed in an alu	uminum foundry as a releasing agent
Comments: 6. The surface coating is utili from permanent molds (steel)	zed in an alu	uminum foundry as a releasing agent
Comments: 6. The surface coating is utili from permanent molds (steel)	zed in an alu	uminum foundry as a releasing agent
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Comments: 6. The surface coating is utili from permanent molds (steel)	zed in an alu	uminum foundry as a releasing agent

PLEASE ENTER:

Facility name: Consolidated Metco, Inc.

EPA ID number: <u>ORD009056037</u>

14. Provide the following information for each offsite shipment of waste.

1994 manifest shipment date (enter month/day)	Manifest document number	Quantity shipped (use unit of measure from #11)	EPA ID # of receiving facility	How managed (enter system code)	Managed at comm. facility? (Y/N
7/22/94	02279	800	WAD991281767	M111	<u>Y</u>
					·
			<u> </u>		
					· .
					<u> </u>
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<u></u>	· · · · · · · · · · · · · · · · · · ·		·		
	· · · · · · · · · · · · · · · · · · ·			7	

1994 Waste Generation & Management—Answer Sheet

PLEASE ENTER:
Facility name: Consolidated Metco, Inc.
EPA ID number: <u>ORD009056037</u>

Note: Make as many two-sided copies of the answer sheet as you need BEFORE anwering any questions. REVIEW QUESTIONS ON PAGES 9-12 BEFORE COMPLETING ANSWER SHEET.

PLEASE TYPE ALL FORMS. FOR EASE OF TYPING, SET LINE SPACING TO 1 1/2.

on <u>Solvent</u>	<u>105 (s</u>	pent n	on-halo	ogenated	solvent) from a Safety-Kleen
mbustible 1	iquid	compri	sed of	primari	ly Petroleum Naptha.
·	D018			D039	
	_ 4. SIC	Code _	3365	· · · · · · · · · · · · · · · · · · ·	5. Mixed Radioactive? ☑ No ☐ Yes
·			7. For	m Code _	B203
2 🗇 3 🗇	4 🗇		8 A.	Residual Ma	anagement M
es in Waste?	1 🗷	2 🗇	3 🗖		
Calculation	1 🗇	2 🗇	3 🗷	4 🗖	
54					
G™ ST □	CO	К□	ΓJ	MT 🗇 .	
XJ Po	unds/gall	lon	☐ Spe	ecific gravit	y 🗇 Pounds/cubic yard
□ On-site	Ø Off	-site	⊐ Botl	h On-site &	Off-site
					Management Code
	•				
m was shipped	off-site i	n 1994,	give deta	uils of each	shipment on the back of this answer
m was shipped	off-site i	n 1994,	give deta	ils of each	shipment on the back of this answer
m was shipped	off-site i	n 1994,	give deta	ils of each	shipment on the back of this answer
s cleaning	and deg	greasi	ng.		
s cleaning	and des	greasi	ng.		
s cleaning	and des	greasi	ng.		
s cleaning	and des	greasi	ng.		
s cleaning	and des	greasi	ng.		
s cleaning	and des	greasi	ng.		
s cleaning	and des	greasi	ng.		
	es in Waste? Calculation 54 G S ST D T On-site	Dolla	Doll8 4. SIC Code 2 3 4 5 es in Waste? 1 2 5 Calculation 1 3 2 5 Calculation 1 7 2 7 Pounds/gallon On-site 2 Off-site	### D018 ### 4. SIC Code 3365 ### 7. For 2	### DO18 DO39 ### A. SIC Code 3365 ### 7. Form Code 2

PLEASE	ENTER:
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Facility name: Consolidated Metco, Inc.

EPA ID number: <u>ORD009056037</u>

14. Provide the following information for each offsite shipment of waste.

1994 manifest shipment date (enter month/day)	Manifest document number	Quantity shipped (use unit of measure from #11)	EPA ID # of receiving facility	How managed (enter system code)	Managed at comm. facility? (Y/N
1/21/94	25385	160.8	ORD981766124	_M021	Y
3/18/94	48749	201	ORD981766124	M021	<u>Y</u>
				-	
·	<u> </u>		<u> </u>		
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General Facility Information

A. Section A asks some general questions about your facility.

(The rest of these forms use the term facility to mean facility or site.)

A-1. Which of the following categories describe your facility?

Use the Worksheet on page 4 of this book to determine the categories into which you fit. (Check all that apply.)

- Hazardous Waste Generator
- ☐ RCRA Treatment, Storage, or Disposal Facility
- ☐ Designated Recycling Facility

A-2. What is the name of your facility?

Consolidated Metco, Inc.

A-3. If different from A-2, what is the name of your facility as filed with the Oregon Secretary of State, Corporation Division?

(If same as A-2, write "Same.")_____Same

A-4. What is your RCRA EPA/DEQ ID number? ORD 009056037

You must complete one set of forms for each ID number held by your company.

A-5. What is the mailing address of this facility?

(Where should DEQ send future form packets and correspondence?)

Street Address or P.O. Box	P. O. Box 83201
City, State, ZIP Code	Portland, Oregon 97283-0201
County	Multnomah

A-6. Where is this facility physically located? (If same as mailing address, write "Same as mailing address.")

13940 N. Rivergate Boulevard

City, State, ZIP Code ______Portland, Oregon 97203

County_______Multnomah

Specific location (if available) Latitude $\frac{Degrees}{45}$ $\frac{Minutes}{37}$ $\frac{Seconds}{29}$ Longitude 122 46 40

(If available, provide the precise location of your facility. Indicate whether you used Township/Range; UTM number; Tax Lot; Latitude/Longitude; or another indicator to provide this.)

1 -7.	who is the legal owner of this to or agency who owns this facility	facility? (Please provide information regarding the person, company, y.)
	Name	Consolidated Metco, Inc.
	Street Address or P.O. Box	P. O. Box 83201
	City, State, ZIP Code	Dantia 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	County	Multnomah
	Phone (503) 286 - 57	f 41
-8.	Has the owner of this facility cl	hanged since you last filed a notification/update report with DEQ?
	⊠ No	☐ Yes
	(If No, skip to A-	-9) (If Yes, answer A-8a)
		A-8a. On what date did the ownership change?
		Date of ownership change://19
		(enter month, day, and year)
	↓	
	City, State, ZIP Code County Phone ()	
50 - 14 	e de la companya de l	
-10.	The state of the s	t on location at your facility regarding site visits and inspections?
	ranic and ritic	e Barker, Plant Manager
-	Phone (503) 286 - 574	$\frac{41}{2}$
-11.	. Whom should the DEQ contact	about hazardous waste activity fees?
	Name	Ernest M. Nimister
	Street Address or P.O. Box	P. O. Box 83201
	City, State, ZIP Code	Portland, Oregon 97283-0201
	County	Multnomah
	Phone (503) 286 - 574	<u>41 </u>
12.	. Whom should the DEQ contact	if clarification is needed on these forms?
	Name and Title	Ernest M. Nimister, Materials Manager
	Phone (503) 286 - 574	Consolidated Metco, Inc.

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	more than up to three	one code applies, please enter the main SIC code other relevant SIC codes in the additional spaces "Codes" section at the end of the Guidebook.)
A-14. At the time of this report, approximately how m 1 to 50 employees 51 or more employees		
B. Section B asks about specific haza To complete this section, you need to know if you Disposal (TSD) facility; and/or a Designated Hazar when answering question A-1 at the beginning of the section is a section by the section by t	are a Hazar lous Waste nis form.	dous Waste Generator; RCRA Treatment/Storage/
B-1. Is your facility a hazardous waste generator?		
(If not sure, refer to Worksheet #1 on page 4 of this	book.)	
☑ Yes (If Yes, answer B-1a)		☐ No (If No, answer B-1b)
(II res, answer b-ra)		(II NO, answer 6-10)
<u> </u>		<u> </u>
B-1a. What type of hazardous waste generator is your facility? (Check one.) (If not sure, refer to Worksheet #2 on page 5 of this book.)	В-	 1b. If your facility is NOT a hazardous waste generator, please indicate the reason(s) below. (Check all that apply.) Our facility never generated hazardous
Large Quantity Generator		waste
Small Quantity GeneratorConditionally Exempt Generator		Our facility has gone out of business: Date closed:/19 (enter month, day, and year)
(Conditionally Exempt Generators who are not required to report for other reasons — e.g., because they are a TSD — do not need to complete these forms, but should return the postcard on the back cover of this book.)		 The waste generated at our facility is exempt from state and RCRA hazardous waste regulation. Our facility generates hazardous waste only occasionally and generated none in
		1991. Our facility previously was a generator, but did not generate any hazardous waste during 1991 due to an effective waste minimization program.
		☐ Other (please specify):

RCRA permitting requirements? Most bazardoùs waste management activities — such	as treating or disposing of hazardous waste — require a
permit under the Resource Conservation and Recovery systems that are exempt from these permit requiremen	Act. However, certain facilities manage hazardous waste its. If any of these exempt systems are used at your facility, ns of Treatment, Disposal, and Recycling in the "Definition
o and harmonia of Yes of the state of the s	No Single Care
(If Yes, answer B-2a and B-2b)	(If No, answer B-2c)
<u> </u>	
B-2a. Do you manage waste generated at this facility or at other facilities? (Check all that apply.) Waste generated at this facility	B-2c. If your facility does not treat, dispose of, or recycle hazardous waste in RCRA-exempt units, do you intend to develop this capacity in the future? (Check one.)
☐ Waste generated at other facilities	☐ Yes 図 No ☐ Not sure
B-2b. Which RCRA-exempt activities occur at your facility? (Check all that apply.)	a post sure.
☐ Treatment	
☐ Disposal	
☐ Recycling	
	Resource Conservation and Recovery Act? (Note that
Disposal of Hazardous Waste as required under the	Resource Conservation and Recovery Act? (Note that of hazardous waste generated on-site by generators. For
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "De Tyes" (If Yes, answer B-3a, B-3b and B-3c)	e Resource Conservation and Recovery Act? (Note that of hazardous waste generated on-site by generators. For efinitions" section of the Guidebook, pages 13-16.) Solve No (If No, answer B-3d)
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "De Yes	Resource Conservation and Recovery Act? (Note that of hazardous waste generated on-site by generators. For efinitions" section of the Guidebook, pages 13-16.) No (If No, answer B-3d) B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "De Yes (If Yes, answer B-3a, B-3b and B-3c) B-3a. What is the status of your RCRA permit? (Check one.) Part A (interim status)	Resource Conservation and Recovery Act? (Note that of hazardous waste generated on-site by generators. For efinitions" section of the Guidebook, pages 13-16.) No (If No, answer B-3d) B-3d. Does your facility intend to develop RCRA-permitted treatment, storage, or disposal capacity in the future? (Check one.)
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "De Tyes" (If Yes, answer B-3a, B-3b and B-3c) B-3a. What is the status of your RCRA permit? (Check one.) Part A (interim status) Part B application pending review	B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.)
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "De Tyes" (If Yes, answer B-3a, B-3b and B-3c) 3-3a. What is the status of your RCRA permit? (Check one.) Part A (interim status)	B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes No (If No. answer B-3d) B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.)
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "De Yes (If Yes, answer B-3a, B-3b and B-3c) B-3a. What is the status of your RCRA permit? (Check one.) Part A (interim status) Part B application pending review Part B permit issued B-3b. Do you manage waste generated at this facil-	B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.)
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "De Tyes" (If Yes, answer B-3a, B-3b and B-3c) B-3a. What is the status of your RCRA permit? (Check one.) Part A (interim status) Part B application pending review Part B permit issued B-3b. Do you manage waste generated at this facility or at other facilities? (Check all that apply.)	B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes No (If No. answer B-3d) Who (If No. answer B-3d) B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.)
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "De Yes (If Yes, answer B-3a, B-3b and B-3c) B-3a. What is the status of your RCRA permit? (Check one.) Part A (interim status) Part B application pending review Part B permit issued B-3b. Do you manage waste generated at this facil-	B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes No (If No. answer B-3d) B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.)
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "De Tyes" (If Yes, answer B-3a, B-3b and B-3c) 3-3a. What is the status of your RCRA permit? (Check one.) Part A (interim status) Part B application pending review Part B permit issued 3-3b. Do you manage waste generated at this facility or at other facilities? (Check all that apply.) Waste generated at this facility Waste generated at other facilities	B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes No (If No. answer B-3d) B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.)
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "De Tyes" (If Yes, answer B-3a, B-3b and B-3c) 3-3a. What is the status of your RCRA permit? (Check one.) Part A (interim status) Part B application pending review Part B permit issued 3-3b. Do you manage waste generated at this facility or at other facilities? (Check all that apply.) Waste generated at this facility Waste generated at other facilities	B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes No (If No. answer B-3d) B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.)
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "De la Yes" (If Yes, answer B-3a, B-3b and B-3c) 3-3a. What is the status of your RCRA permit? (Check one.) Part A (interim status) Part B application pending review Part B permit issued 3-3b. Do you manage waste generated at this facility or at other facilities? (Check all that apply.) Waste generated at this facility Waste generated at other facilities	B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes No (If No. answer B-3d) B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.)
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "De Tyes" (If Yes, answer B-3a, B-3b and B-3c) 3-3a. What is the status of your RCRA permit? (Check one.) Part A (interim status) Part B application pending review Part B permit issued 3-3b. Do you manage waste generated at this facility or at other facilities? (Check all that apply.) Waste generated at this facility Waste generated at other facilities 3-3c. Which RCRA-permitted activities occur at your facility? (Check all that apply.)	B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes No (If No. answer B-3d) B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.)
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "Definitions of storage and accumulation, see the "Definition of storage and accumulation, see the "Definition, see the "Def	B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes No No (If No, answer B-3d)
Disposal of Hazardous Waste as required under the storage does not mean the temporary accumulation definitions of storage and accumulation, see the "Definitions of storage and accumulation, see the "Definition of storage and accumulation, see the "Definition, see t	B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes No (If No. answer B-3d) B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.)

C. Section C asks you to certify the information provided in these forms.

C-1. Upon completion of ALL required forms, please provide the following:

Check which forms you are submitting and list the number of pages submitted for each form.

Form 2 — WMIN		# pages	None, not required to submit this form
Form 3 — GEN	X	5 # pages	☐ None, not required to submit this form
Form 4 — HWR		# pages	None, not required to submit this form
Form 5 — CI		# pages	■ None, not required to submit this form

The following must be signed by an authorized representative of the facility.

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

February 28, 1992

Date

Ernest M. Nimister

Materials Manager

Name (please print or type)

Title

Oregon DEQ sincerely thanks you for the time and effort you have spent completing these forms.

Form 3

Form 3 — Hazardous Waste Generation and Management

PLEASE ENTER:

Answers

Facility name: Consolidated Metco, Inc

ORD 009056037

Before completing, copy as many two-sided sheets as you will need.

A. Description of hazardous waste stream	a I I imaneeres northernangeres in			
A-1. Describe waste stream: Solvent 105 (Spent Safety-Kleen Parts Washer. Hazardous primarily of Petroleum Naptha. A-2. EPA hazardous waste code(s) 1. D001 2.	due to ignitability. Comprised			
	3. 4.			
A-3. If state-only, Oregon state-only waste code: OR _				
A-4. SIC code (associated with generation of this waste): 3365	A-5. Mixed radioactive? ☑ No ☐ Yes			
A-6. Source code: A 19 A A	A-7. Waste form code: B_203			
	I from management of non-hazardous waste I from management of hazardous waste			
A-8a. If residual from management of hazardous waste	e, enter system code: M			
	B. □ Yes, waste contains toxic substance B. □ Don't know			
A-9a. C.A.S. number(s):				
A-10. Point of measurement or calculation: 1. □ Before mixing with hazardous or non-hazardous wastes 2. □ After mixing several different hazardous waste streams together 3. ☒ After mixing with non-hazardous wastes 4. □ After mixing multiple hazardous waste streams and non-hazardous wastes				
A-11. Quantity generated: 330 Unit of measure	e (Check one): □ST □MT □P □K 図G □L□C			
A-11a. If unit of measure is G, L, or C, enter the density and indicate the density unit of measure for the waste. Density: 6.4 Unit of measure: ☑ Pounds/gallon ☐ Specific gravity ☐ Pounds/cubic yard				

B. Waste minimization measures	
B-1. Waste minimization measures? ☑ No (Skip to Section C) ☐	Yes (Go to B-1a.)
B-1a. Waste minimization activity codes: W W	W
B-1b. Increase toxicity or emissions?	
B-1c. Enter production index:	
B-1d. Estimate amount of reduction from source reduction:	
B-1e. Estimate amount recycled:	
C. Waste management activities	igg (1) suggested by 100 sectors (1) and 1)
C-1. Was waste stream managed on-site or off-site in 1991? 1. □ Managed on-site only 2. □ Managed off-site only 3. ☒ Part managed only 3. ☒ Part m	
C-2. System 1. Quantity managed on-site: 220 Gallons On-site: On-s	site system code: M_121_site s
<u> 1888 - Para Baran, Ba</u>	
C-3. Please provide the following information for each shipment of the waste	
C-3. Please provide the following information for each shipment of the wastern shipment date. 1991 manifest Manifest Quantity shipped shipment date document (use unit of EPA ID # c (enter month/day) number measure from A-11) receiving factors.	e managed off-site. How managed Managed fenter system at comm.
1991 manifest Manifest Quantity shipped Shipment date document (use unit of EPA ID # c	e managed off-site. How managed Managed fenter system at comm.
1991 manifest Manifest Quantity shipped Shipment date document (use unit of EPA ID # c	e managed off-site. How managed Managed fenter system at comm.
1991 manifest Manifest Quantity shipped Shipment date document (use unit of EPA ID # c	e managed off-site. How managed Managed fenter system at comm.
1991 manifest Manifest Quantity shipped Shipment date document (use unit of EPA ID # c	How managed Managed at comm. (enter system accord) M
1991 manifest Manifest Quantity shipped shipment date document (use unit of receiving factors) measure from A-11) receiving factors and the more than four shipments, please use the attached continuation sheet, or see page	How managed Managed at comm. facility (Y/N) M
If more than four shipments, please use the attached continuation sheet, or see pagtions on providing a computer-generated continuation sheet. D. Please provide any comments, additional information of the providing a modern and the provided an	How managed Managed (enter system code) Managed (enter system code) Managed at comm. facility? (Y/N) Managed Analysed
If more than four shipments, please use the attached continuation sheet, or see pagtions on providing a computer-generated continuation sheet. D. Please provide any comments, additional information of the provided and the prov	How managed Managed at comm. facility (Y/N) M M e 11 of the Guidebook for instruction, or explanation:
If more than four shipments, please use the attached continuation sheet, or see pagtions on providing a computer-generated continuation sheet. D. Please provide any comments, additional information of the second	How managed Managed at comm. facility (Y/N) M M e 11 of the Guidebook for instruction, or explanation:
If more than four shipments, please use the attached continuation sheet, or see pagtions on providing a computer-generated continuation sheet. D. Please provide any comments, additional information of the providing a mold releasing agent. C-1 Spencer Environmental is contracted to neuronal shipments of the provided and the provided the provided to neuronal shipments of the providing and the provided the provided the provided the provided to neuronal shipments and the provided the provided the provided to neuronal providing a contracted to neuronal provided the provided	How managed Managed at comm. facility (Y/N) M M e 11 of the Guidebook for instruction, or explanation:

Form 3

Form 3 — Hazardous Waste Generation and Management

Continuation Sheet for Question C-3

PLEASE ENTER:

Consolidated Metco, Inc
Facility name: ______

EPA ID number: ORD 009056037

Before completing, copy as many sheets as you will need.

Continuation sheet # $\frac{2}{}$ of $\frac{2}{}$.

Waste Stream's RCRA or State Waste Code(s) _

D001

1991 manifest shipment date enter month/day)	Manifest document number	Quantity shipped (use unit of measure from A-11)	EPA ID # of receiving facility	How managed (enter system code) f	Managed at comm. acility? (Y/N
10/09/91	37378	30	ORD 000712067	M_021	Y
11/27/91	46074	30	ORD 000712067	M_021	Y
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	-			M M	

В.	Waste n	ninimization	n measures 📖			A CANADA	
B-1.	Waste min	iimization measu	ures? 🛛 No (Skip to	Section C)	☐ Yes (Go to	B-1a.)	
	B-1a. Wast	te minimization a	activity codes: W	W	W	W	
· -5.	B-1b. Incre	ease toxicity or er	nissions? 🗅 Yes 🗆) No			
	B-1c. Enter	r production inde	3X:				
e Garage	B-1d. Estir	mate amount of r	reduction from source	reduction:			New March 1988
	B-1e. Estin	nate amount recy	cled:		te distribution	Section (1988) and the section of th	
C.			activities		k samuel jääret kettet on samuel ja sei	And the second s	epundanie jest e
C-1.	1. ☐ Mana	ged on-site only	2. Managed off-site	te only 3.	☐ Part managed or		
C-2.	•		ed on-site:		•		-
C-3.	Please prov	vide the following	g information for each	shipment of 1	he waste managed	l off-site.	
1991 shipm	manifest nent date month/day)	Manifest document number	Quantity shipped (use unit of measure from A-11)	The second second	EPA ID # of eceiving facility	How managed (enter system code)	Managed at comm. facility? (Y/N)
1991 shipm (enter r	nent date	document	(use unit of			(enter system code) M 02·1	at comm.
1991 shipm (enter r	/21/91 /19/91	document number	(use unit of measure from A-11)	ORD 09:	2895481 2895481	(enter system code) M_021 M_021	at comm.
1991 shipm (enter r 02 / 04 / 06 /	/21/91 /19/91 /13/91	document number 45261 38095 30387	(use unit of measure from A-11) 60 60	ORD 09:	2895481 2895481 2895481	(enter system code) M_021 M_021 M_021	at comm. facility? (Y/N)
1991 shipm (enter r 02 / 04 / 06 /	/21/91 /19/91	document number 45261 38095	(use unit of measure from A-11) 60	ORD 09:	2895481 2895481	(enter system code) M_021 M_021	at comm. facility? (Y/N) Y Y
1991 shipm (enter r 02 / 04 / 06 / 08 /	/21/91 /19/91 /13/91 /08/91	document number 45261 38095 30387 33640	(use unit of measure from A-11) 60 60	ORD 09: ORD 09: ORD 09:	2895481 2895481 2895481 2895481 2895481	(enter system code) M_021 M_021 M_021 M_021 M_021	at comm. facility? (Y/N) Y Y Y Y Y Y
1991 shipm (enter r 02 / 04 / 06 / 08 /	/21/91 /19/91 /13/91 /08/91 re than four s	document number 45261 38095 30387 33640 Shipments, please	(use unit of measure from A-11) 60 60 60 60	ORD 092 ORD 092 ORD 092 ORD 092	2895481 2895481 2895481 2895481 2895481	(enter system code) M_021 M_021 M_021 M_021 M_021	at comm. facility? (Y/N) Y Y Y Y Y Y
1991 shipm (enter r 02 / 04 / 06 / 08 /	/21/91 /19/91 /13/91 /08/91 re than four son providing	document number 45261 38095 30387 33640 shipments, please of a computer-general	(use unit of measure from A-11) 60 60 60 60 use the attached continu	ORD 09: ORD 09: ORD 09: ORD op: attion sheet, o	2895481 2895481 2895481 2895481 2895481 or see page 11 of the	(enter system code) M 021 M 021 M 021 M 021 M 021 M 021	at comm. facility? (Y/N) Y Y Y Y Y A Y Y Y Y Y Y Y
1991 shipm (enter r 02 / 04 / 06 / 08 / If mo tions	/21/91 /19/91 /13/91 /08/91 re than four son providing	document number 45261 38095 30387 33640 shipments, please of a computer-general	(use unit of measure from A-11) 60 60 60 60 use the attached continurated continuation sheet.	ORD 09: ORD 09: ORD 09: ORD op: attion sheet, o	2895481 2895481 2895481 2895481 2895481 or see page 11 of the	(enter system code) M 021 M 021 M 021 M 021 M 021 M 021	at comm. facility? (Y/N) Y Y Y Y Y A Y Y Y Y Y Y Y
1991 shipm (enter r 02 / 04 / 06 / 08 / If mo tions	/21/91 /19/91 /13/91 /08/91 re than four son providing	document number 45261 38095 30387 33640 shipments, please of a computer-general	(use unit of measure from A-11) 60 60 60 60 use the attached continurated continuation sheet.	ORD 09: ORD 09: ORD 09: ORD op: attion sheet, o	2895481 2895481 2895481 2895481 2895481 or see page 11 of the	(enter system code) M 021 M 021 M 021 M 021 M 021 M 021	at comm. facility? (Y/N) Y Y Y Y Y A Y Y Y Y Y Y Y
1991 shipm (enter r 02 / 04 / 06 / 08 / If mo tions	/21/91 /19/91 /13/91 /08/91 re than four son providing	document number 45261 38095 30387 33640 shipments, please of a computer-general	(use unit of measure from A-11) 60 60 60 60 use the attached continurated continuation sheet.	ORD 09: ORD 09: ORD 09: ORD op: attion sheet, o	2895481 2895481 2895481 2895481 2895481 or see page 11 of the	(enter system code) M 021 M 021 M 021 M 021 M 021 M 021	at comm. facility? (Y/N) Y Y Y Y Y A Y Y Y Y Y Y Y
1991 shipm (enter r 02 / 04 / 06 / 08 / If mo tions	/21/91 /19/91 /13/91 /08/91 re than four son providing	document number 45261 38095 30387 33640 shipments, please of a computer-general	(use unit of measure from A-11) 60 60 60 60 use the attached continurated continuation sheet.	ORD 09: ORD 09: ORD 09: ORD op: attion sheet, o	2895481 2895481 2895481 2895481 2895481 or see page 11 of the	(enter system code) M 021 M 021 M 021 M 021 M 021 M 021	at comm. facility? (Y/N) Y Y Y Y Y A Y Y Y Y Y Y Y
1991 shipm (enter r 02 / 04 / 06 / 08 / If mo tions	/21/91 /19/91 /13/91 /08/91 re than four son providing	document number 45261 38095 30387 33640 shipments, please of a computer-general	(use unit of measure from A-11) 60 60 60 60 use the attached continurated continuation sheet.	ORD 09: ORD 09: ORD 09: ORD op: attion sheet, o	2895481 2895481 2895481 2895481 2895481 or see page 11 of the	(enter system code) M 021 M 021 M 021 M 021 M 021 M 021	at comm. facility? (Y/N) Y Y Y Y Y A Y Y Y Y Y Y Y

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General Facility Information

-A:	Section A asks some	general questions about your facility.
	The Court of the C	term facility to mean facility or site.)
. selftire	en en en en e n en	And the second s
A-1.	Which of the following catego	ries describe your facility?
	Use the Worksheet on page 4 o	f this book to determine the categories into which you fit. (Check all that apply.)
	☐ Hazardous Waste Generato	
	Designated Recycling Facility	
A-2.	What is the name of your facil	ity?
	Consolidated M	etco, Inc.
A 2	If its A Qhatiati	honomo of your facility of Clad with the One are Courter of State Courter
A-3.	tion Division?	he name of your facility as filed with the Oregon Secretary of State, Corpora-
	(If same as A-2, write "Same.")_	Same
A-4.	What is your RCRA EPA/DEQ	ID number? ORD 009056037
		orms for each ID number held by your company.
	· · · · · · · · · · · · · · · · · · ·	
A-5.	What is the mailing address of	this facility?
	(Where should DEQ send future	form packets and correspondence?)
	Street Address or P.O. Roy	P. O. Box 83201
	Street Address or P.O. Box	and the second of the second o
٠	City, State, ZIP Code	P. O. Box 83201
		P. O. Box 83201 Portland, Oregon 97283-0201
A-6.	City, State, ZIP Code	P. O. Box 83201 Portland, Oregon 97283-0201 Multnomah
A-6.	City, State, ZIP Code County Where is this facility physically	P. O. Box 83201 Portland, Oregon 97283-0201 Multnomah y located? (If same as mailing address, write "Same as mailing address.")
A-6.	City, State, ZIP Code County Where is this facility physically Street Address	P. O. Box 83201 Portland, Oregon 97283-0201 Multnomah ylocated? (If same as mailing address, write "Same as mailing address.") 13940 N. Rivergate Boulevard
A-6.	City, State, ZIP Code County Where is this facility physically Street Address	P. O. Box 83201 Portland, Oregon 97283-0201 Multnomah y located? (If same as mailing address, write "Same as mailing address.") 13940 N. Rivergate Boulevard trial park, building name, or other physical location description. Do not enter a
A-6.	City, State, ZIP Code County Where is this facility physically Street Address (If no street address, enter indust Post Office box.)	P. O. Box 83201 Portland, Oregon 97283-0201 Multnomah y located? (If same as mailing address, write "Same as mailing address.") 13940 N. Rivergate Boulevard trial park, building name, or other physical location description. Do not enter a Portland, Oregon 97203
A-6.	City, State, ZIP Code County Where is this facility physically Street Address (If no street address, enter indust Post Office box.) City, State, ZIP Code	P. O. Box 83201 Portland, Oregon 97283-0201 Multnomah y located? (If same as mailing address, write "Same as mailing address.") 13940 N. Rivergate Boulevard trial park, building name, or other physical location description. Do not enter a Portland, Oregon 97203 Multnomah
A-6.	City, State, ZIP Code County Where is this facility physically Street Address (If no street address, enter indust Post Office box.) City, State, ZIP Code	P. O. Box 83201 Portland, Oregon 97283-0201 Multnomah ylocated? (If same as mailing address, write "Same as mailing address.") 13940 N. Rivergate Boulevard trial park, building name, or other physical location description. Do not enter a Portland, Oregon 97203 Multnomah Degrees Minutes Seconds

Λ-1.	or agency who owns this facili	facility? (Please provide information regarding the person, company, ty.)			
	Name	Consolidated Metco, Inc.			
	Street Address or P.O. Box	P. O. Box 83201			
	City, State, ZIP Code	Portland, Oregon 97203			
	County	Multnomah			
	Phone (503) 286 - 57	<u>'41</u>			
A-8.	Has the owner of this facility o	changed since you last filed a notification/update report with DEQ?			
•	⊠ No	© Yes			
	(If No, skip to A	A-9) (If Yes, answer A-8a)			
		A-8a. On what date did the ownership change?			
		Date of ownership change://19			
		(enter month, day, and year)			
	T. J				
	City, State, ZIP Code County Phone ()	andrigen of the state of the st			
10	THE LINE DEC.				
\-1 U.		et on location at your facility regarding site visits and inspections? See Barker, Plant Manager			
	Traine and Title				
	Phone (503) 286 - 57	741			
	TITLE I IIII DOO				
\-11.	whom should the DEQ contac	ct about hazardous waste activity fees? Ernest M. Nimister			
	Name	P. O. Box 83201			
	Street Address or P.O. Box				
	City, State, ZIP Code	Portland, Oregon 97283-0201			
	County	Multnomah			
	Phone (503) 286 - 57	<u>'41</u>			
-12.	Whom should the DEQ contac	ct if clarification is needed on these forms?			
	Name and Title	Ernest M. Nimister, Materials Manager			
•	Phone (_503) _286 57	Consolidated Metco, Inc. 13940 N. Rivergate Boulevard Portland, Oregon 97203			

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	34.3
C. Service Co. Co. Co.	72
	15.3
	(F)
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products or services rendered at this facility. (If in the space for the primary number below, and	Classification (SIC) Code that best describes the principal more than one code applies, please enter the main SIC code up to three other relevant SIC codes in the additional spaces 3-15 in the "Codes" section at the end of the Guidebook.) 3 4
	ardous waste activities at your facility. are a Hazardous Waste Generator; RCRA Treatment/Storage/ dous Waste Recycling Facility. You provided this information
B-1. Is your facility a hazardous waste generator? (If not sure, refer to Worksheet #1 on page 4 of this ☑ Yes (If Yes, answer B-1a)	s book.) □ No (If No, answer B-1b)
B-1a. What type of hazardous waste generator is your facility? (Check one.) (If not sure, refer to Worksheet #2 on page 5 of this book.) Large Quantity Generator Small Quantity Generator Conditionally Exempt Generator (Conditionally Exempt Generators who are not required to report for other reasons — e.g., because they are a TSD — do not need to complete these forms, but should return the postcard on the back cover of this book.)	B-1b. If your facility is NOT a hazardous waste generator, please indicate the reason(s) below. (Check all that apply.) Our facility never generated hazardous waste Our facility has gone out of business: Date closed://19 (enter month, day, and year) The waste generated at our facility is exempt from state and RCRA hazardous waste regulation. Our facility generates hazardous waste only occasionally and generated none in 1991. Our facility previously was a generator, but did not generate any hazardous waste during 1991 due to an effective waste minimization program. Other (please specify):

B-2.		
	Did your facility treat, dispose of, or recycle any RCRA permitting requirements?	y hazardous waste on-site in units that are exempt from
	permit under the Resource Conservation and Reco- systems that are exempt from these permit requires	uch as treating or disposing of hazardous waste — require a overy Act. However, certain facilities manage hazardous waste in ments. If any of these exempt systems are used at your facility, nitions of Treatment, Disposal, and Recycling in the "Definitions' DEQ at (503) 229-6240 for more information.)
	☐ Yes (If Yes, answer B-2a and B-2b) ↓	(If No, answer B-2c)
В-	 2a. Do you manage waste generated at this facility or at other facilities? (Check all that apply.) Waste generated at this facility Waste generated at other facilities 	B-2c. If your facility does not treat, dispose of, or recycle hazardous waste in RCRA-exempt units, do you intend to develop this capacity in the future? (Check one.) Yes No
B-:	2b. Which RCRA-exempt activities occur at your facility? (Check all that apply.)	☐ Not sure
	☐ Treatment ☐ Disposal ☐ Recycling	
	Disposal of Hazardous Waste as required under	es it hold a Part B permit for the Treatment, Storage, or
	storage does not mean the temporary accumulat	the Resource Conservation and Recovery Act? (Note that tion of hazardous waste generated on-site by generators. For "Definitions" section of the Guidebook, pages 13-16.) No (If No, answer B-3d)
Γ	storage does not mean the temporary accumulated definitions of storage and accumulation, see the Yes (If Yes, answer B-3a, B-3b and B-3c)	the Resource Conservation and Recovery Act? (Note that tion of hazardous waste generated on-site by generators. For "Definitions" section of the Guidebook, pages 13-16.) No (If No, answer B-3d)
В-3	storage does not mean the temporary accumulated definitions of storage and accumulation, see the Yes	the Resource Conservation and Recovery Act? (Note that tion of hazardous waste generated on-site by generators. For "Definitions" section of the Guidebook, pages 13-16.) No
	storage does not mean the temporary accumulated definitions of storage and accumulation, see the Yes (If Yes, answer B-3a, B-3b and B-3c) Ba. What is the status of your RCRA permit? (Check one.) Part A (interim status) Part B application pending review	The Resource Conservation and Recovery Act? (Note that tion of hazardous waste generated on-site by generators. For "Definitions" section of the Guidebook, pages 13-16.) No (If No, answer B-3d) B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes No Not sure
	storage does not mean the temporary accumulated definitions of storage and accumulation, see the Yes (If Yes, answer B-3a, B-3b and B-3c) Ba. What is the status of your RCRA permit? (Check one.) Part A (interim status) Part B application pending review Part B permit issued Bb. Do you manage waste generated at this facil-	The Resource Conservation and Recovery Act? (Note that tion of hazardous waste generated on-site by generators. For "Definitions" section of the Guidebook, pages 13-16.) No (If No, answer B-3d) B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes No Not sure
B-3	storage does not mean the temporary accumulated definitions of storage and accumulation, see the Yes (If Yes, answer B-3a, B-3b and B-3c) Ba. What is the status of your RCRA permit? (Check one.) Part A (interim status) Part B application pending review Part B permit issued Bb. Do you manage waste generated at this facility or at other facilities? (Check all that apply.) Waste generated at this facility	The Resource Conservation and Recovery Act? (Note that tion of hazardous waste generated on-site by generators. For "Definitions" section of the Guidebook, pages 13-16.) No (If No, answer B-3d) B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes No Not sure
B-3	storage does not mean the temporary accumulated definitions of storage and accumulation, see the Yes (If Yes, answer B-3a, B-3b and B-3c) Ba. What is the status of your RCRA permit? (Check one.) Part A (interim status) Part B application pending review Part B permit issued Bb. Do you manage waste generated at this facility or at other facilities? (Check all that apply.) Waste generated at this facility Waste generated at other facilities Bc. Which RCRA-permitted activities occur at your facility? (Check all that apply.) Treatment	The Resource Conservation and Recovery Act? (Note that tion of hazardous waste generated on-site by generators. For "Definitions" section of the Guidebook, pages 13-16.) No (If No, answer B-3d) B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes No Not sure
B-3	storage does not mean the temporary accumulated definitions of storage and accumulation, see the Yes (If Yes, answer B-3a, B-3b and B-3c) Ba. What is the status of your RCRA permit? (Check one.) Part A (interim status) Part B application pending review Part B permit issued Bb. Do you manage waste generated at this facility or at other facilities? (Check all that apply.) Waste generated at this facility Waste generated at other facilities Bc. Which RCRA-permitted activities occur at your facility? (Check all that apply.)	B-3d. Does your facility intend to develop RCRApermitted treatment, storage, or disposal capacity in the future? (Check one.) Yes Not sure

C. Section C asks you to certify the information provided in these forms.

C-1. Upon completion of ALL required forms, please provide the following:

Check which forms you are submitting and list the number of pages submitted for each form.

Form 2 — WMIN	# pages	None, not required to submit this form
Form 3 — GEN	<u> </u>	☐ None, not required to submit this form
Form 4 — HWR	# pages	None, not required to submit this form
Form 5 — CI	# pages	None, not required to submit this form

The following must be signed by an authorized representative of the facility.

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

February 28, 1992

Date

Ernest M. Nimister

Materials Manager

Name (please print or type)

Title

Oregon DEQ sincerely thanks you for the time and effort you have spent completing these forms.

Form 3

Form 3 — Hazardous Waste Generation and Management

PLEASE ENTER:

Answers

Facility name: Consolidated Metco, Inc.

EPA ID number: ORD 009056037

Before completing, copy as many two-sided sheets as you will need.

A. Description of hazardous waste stream
A-1. Describe waste stream: Solvent 105 (Spent Nonhalogenated Solvent) from a Safety-Kleen Parts Washer. Hazardous due to ignitability. Comprised primarily of Petroleum Naptha.
A-2. EPA hazardous waste code(s) 1 2 3 4
A-3. If state-only, Oregon state-only waste code: OR
A-4. SIC code (associated with generation of this waste): A-5. Mixed radioactive? No Pessociated with Significant Properties (A-5. Mixed radioactive) A-5. Mixed radioactive?
A-6. Source code: A 19 A A A-7. Waste form code: B 203
A-8. Origin: 1. ☑ Ongoing generation 3. ☐ Residual from management of non-hazardous waste 2. ☐ One time/intermittent 4. ☐ Residual from management of hazardous waste
A-8a. If residual from management of hazardous waste, enter system code: M
A-9. Reported toxic substances in waste? 1. ☑ No, facility did not fill out Form R 2. ☐ No, no toxic substances in waste 3. ☐ Yes, waste contains toxic substance 4. ☐ Don't know
A-9a. C.A.S. number(s):
A-10. Point of measurement or calculation: 1. □ Before mixing with hazardous or non-hazardous wastes 2. □ After mixing several different hazardous waste streams together 3. ☒ After mixing with non-hazardous wastes 4. □ After mixing multiple hazardous waste streams and non-hazardous wastes
A-11. Quantity generated: 330 Unit of measure (Check one): ST MT P K GG L C
A-11a. If unit of measure is G, L, or C, enter the density and indicate the density unit of measure for the waste. Density: 6.4 Unit of measure: 图 Pounds/gallon 및 Specific gravity 및 Pounds/cubic yard

B. Waste minimization measures	A Company of the Comp	1975
B-1. Waste minimization measures? So No (Skip to Section C) 🚨 Yes (Go to B-1	a.)
B-1a. Waste minimization activity codes: W W	/ W	W
B-1b. Increase toxicity or emissions?	e de la companya de l	en tres a tr
B-1c. Enter production index:		
B-1d. Estimate amount of reduction from source reduction	1:	
B-1e. Estimate amount recycled:		
C. Waste management activities	is: kenjagdige einu ing	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
C-1. Was waste stream managed on-site or off-site in 1991? 1. □ Managed on-site only 2. □ Managed off-site only	3. 🛚 Part managed on-site	e; part managed off-site
C-2. System 1. Quantity managed on-site: 220 Gallons System 2. Quantity managed on-site:	On-site system co	de: M_121 de: M
		the state of the s
C-3. Please provide the following information for each shipment	of the waste managed off	-site.
C-3. Please provide the following information for each shipment 1991 manifest Manifest Quantity shipped (use unit of (enter month/day) number (use unit of measure from A-11)	of the waste managed off EPA ID # of receiving facility	How managed Managed (enter system at comm. code) facility? (Y/N)
1991 manifest Manifest Quantity shipped shipment date document (use unit of	EPA ID # of	How managed Managed (enter system at comm.
1991 manifest Manifest Quantity shipped shipment date document (use unit of	EPA ID # of	How managed Managed (enter system at comm.
1991 manifest Manifest Quantity shipped shipment date document (use unit of	EPA ID # of	How managed Managed (enter system at comm.
1991 manifest Manifest Quantity shipped shipment date document (use unit of	EPA ID # of receiving facility	How managed (enter system code) Managed at comm. facility? (Y/N) M M M
1991 manifest Manifest Quantity shipped (use unit of measure from A-11) If more than four shipments, please use the attached continuation sheet	EPA ID # of receiving facility et, or see page 11 of the Gu	How managed (enter system code) Managed at comm. facility? (Y/N) M
1991 manifest document (use unit of measure from A-11) If more than four shipments, please use the attached continuation sheet tions on providing a computer-generated continuation sheet. D. Please provide any comments, additional i A-6 This is a mold releasing agent.	EPAID # of receiving facility et, or see page 11 of the Gu nformation, or exp	How managed (enter system code) Managed at comm. facility? (Y/N) M
1991 manifest document (use unit of measure from A-11) If more than four shipments, please use the attached continuation sheet tions on providing a computer-generated continuation sheet. D. Please provide any comments, additional i A-6 This is a mold releasing agent. C-1 Spencer Environmental is contracte	EPAID# of receiving facility et, or see page 11 of the Gu nformation, or exp d to neutralize	How managed (enter system code) Managed at comm. facility? (Y/N) M
1991 manifest shipment date (enter month/day) If more than four shipments, please use the attached continuation sheetions on providing a computer-generated continuation sheet. D. Please provide any comments, additional i A-6 This is a mold releasing agent. C-1 Spencer Environmental is contracte stream on-site and then transports	EPAID# of receiving facility et, or see page 11 of the Gu nformation, or exp d to neutralize	How managed (enter system code) Managed at comm. facility? (Y/N) M
1991 manifest document (use unit of measure from A-11) If more than four shipments, please use the attached continuation sheet tions on providing a computer-generated continuation sheet. D. Please provide any comments, additional i A-6 This is a mold releasing agent. C-1 Spencer Environmental is contracte	EPAID# of receiving facility et, or see page 11 of the Gu nformation, or exp d to neutralize	How managed (enter system code) Managed at comm. facility? (Y/N) M

Form 3

Form 3 — Hazardous Waste Generation and Management

Continuation Sheet for Question C-3

PLEASE ENTER:

Consolidated Metco, Inc

EPA ID number: ORD 009056037

Before completing, copy as many sheets as you will need.

Continuation sheet # $\frac{2}{2}$ of $\frac{2}{2}$.

Waste Stream's RCRA or State Waste Code(s)

D001

Manifest document number	Quantity shipped (use unit of measure from A-11)	EPA ID # of receiving facility	How managed Managed (enter system at comm. code) facility? (Y/I
37378	30	ORD 000712067	021 Y
46074	30	ORD 000712067	021 Y
			M
			M
			M
			M
			M
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			M
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-	· · · · · · · · · · · · · · · · · · ·		M
	_ `		M M
	document number	document number (use unit of measure from A-11) 37378 30 46074 30	document (use unit of number measure from A-11) 37378 30 ORD 000712067

			ı
	:		
			į

Form 3 — Hazardous Waste Generation and Management

PLEASE ENTER:

Answers

Facility name: Consolidated Metco, Inc.

EPA ID number: ORD 009056037

Before completing, copy as many two-sided sheets as you will need.

A. ****D	escription of hazardous waste stream
molds	scribe waste stream: Bent Permanent Mold Releasing Agent from coating Hazardous due to high PH and is a corrosive. Primarily ised of Sodium Silicate and water.
A-2. EP	A hazardous waste code(s) 1 2 3 4
A-3. If s	state-only, Oregon state-only waste code: OR
	C code (associated with neration of this waste): A-5. Mixed radioactive? No Yes
A-6. So	urce code: A 29 A A A-7. Waste form code: B 114
A-8. Or	igin: 1. ☑ Ongoing generation 3. ☐ Residual from management of non-hazardous waste 2. ☐ One time/intermittent 4. ☐ Residual from management of hazardous waste
A-8	a. If residual from management of hazardous waste, enter system code: M
A-9. Re	ported toxic substances in waste? 1. ☑ No, facility did not fill out Form R 2. ☐ No, no toxic substances in waste 4. ☐ Don't know
A-9	a. C.A.S. number(s):
A-10. Po	 Int of measurement or calculation: Before mixing with hazardous or non-hazardous wastes After mixing several different hazardous waste streams together After mixing with non-hazardous wastes After mixing multiple hazardous waste streams and non-hazardous wastes
A-11. Qu	antity generated: Unit of measure (Check one): □ ST □ MT □ P □ K ☎ G □ L □ C
A-1	1a. If unit of measure is G, L, or C, enter the density and indicate the density unit of measure for the waste. Density: 8 Unit of measure: 對 Pounds/gallon □ Specific gravity □ Pounds/cubic yard

Please turn over.

B-1.	Waste mir	nimization meas	ures? 🖾 No (Skip to	Section C)	☐ Yes (Go t	to B-1a.)	
-	. 					ب ي بين بين بين بين بين	
	B-1a. Was	te minimization	activity codes: W	W	W	W	· · · · · · · · · · · · · · · · · · ·
. *	B-1b. Incr	ease toxicity or e	emissions? 🗆 Yes 🗆	ì No			
	• • • • • • • • • • • • • • • • • • • •	r production ind	lex:				
e e e e e e e e e e e e e e e e e e e	B-1d. Esti	mate amount of	reduction from source	reduction:	and the second		
	B-1e. Estir	nate amount rec	cycled:		i de la compania del compania del compania de la compania del compania del compania de la compania del compania	ž.	
C.			t activities		oostoorepression	tuatille m	
C-2.			2. Managed off-sit	· · · · · · · · · · · · · · · · · · ·	On-site syste	m code: M	
C-3.	System 1. System 2. Please pro	Quantity manag Quantity manag vide the followin	ged on-site: ged on-site: ng information for each s Quantity shipped	shipment of the	On-site syste	em code: Med off-site.	 Managed
C-3.	System 1. System 2. Please pro	Quantity manag Quantity manag vide the followin	ged on-site:ged on-site:	shipment of the	On-site syste	em code: Med off-site. How managed (enter system	
C-3.	System 1. System 2. Please pro manifest lent date month/day) / 21/91	Quantity manag Quantity manag vide the followin Manifest document number 45261	ged on-site: ged on-site: ng information for each s Quantity shipped (use unit of measure from A-11)	shipment of the	On-site systemanage Waste manage PAID # of siving facility 895481	ed off-site. How managed (enter system code) M_021	Managed at comm. facility? (Y/N)
C-3. 1991 r shipm (enter n 02/04/	System 1. System 2. Please pro manifest lent date month/day) // 21/91 // 19/91	Quantity manag Quantity manag vide the followin Manifest document number 45261 38095	ged on-site: ged on-site: ng information for each s Quantity shipped (use unit of measure from A-11) 60 60	shipment of the	On-site syste e waste manage PAID # of siving facility 395481	ed off-site. How managed (enter system code) M 021 M 021	Managed at comm. facility? (Y/N)
C-3. 1991 r shipm (enter r) 02/ 04/ 06/	System 1. System 2. Please pro manifest lent date month/day) / 21/91	Quantity manag Quantity manag vide the followin Manifest document number 45261	ged on-site: ged on-site: ng information for each s Quantity shipped (use unit of measure from A-11)	ord 0928	On-site systemanage Waste manage PAID # of siving facility 895481	ed off-site. How managed (enter system code) M_021	Managed at comm. facility? (Y/N)
C-3. 1991 r shipm (enter n	System 1. System 2. Please pro manifest lent date month/day) (21/91 (19/91 (13/91 (08/91 re than four on providing	Quantity manag Quantity manag vide the followin Manifest document number 45261 38095 30387 33640 shipments, please g a computer-gene	ged on-site: ged on-site: ged on-site: ged on-site: Quantity shipped (use unit of measure from A-11) 60 60 60	or of the or shipment of the received or of the rec	On-site system anager waste manager part of the siving facility and side of the system and side of the system and system	em code: Med off-site. How managed (enter system code) M_021 M_021 M_021 M_021 M_021 M_021 M_021 M_021	Manage at comm facility? (Y). Y Y Y Y Y OTHER STREET

Oregon DEQ Hazardous Waste Site Report

? [Close Report]

EPA ID: ORD009056037 Active

Common Consolidated Metco Inc Name:

Employee Activity 225 3/2/1992 count: Start:

13940 N RIVERGATE BLVD

Location: PORTLAND OR 97203

MULTNOMAH County

-122.7777 -122° 46' 45.6228 45° 37' Latitude: Longitude:

22.1000" 39.7000"

SIC Codes: 3365 - ALUMINUM FOUNDRIES

Facility is a Hazardous Waste Generator Current Status: CEG as of 1/6/2006

Hazardous Waste Generation Reporting History

Report Year	Generator Status	Number of Waste Streams	Tons Generated	Sent Date	Received Date
2005	CEG	0		12/21/2005	01/09/2006
2004	SQG	1	0.189222875	12/29/2004	01/20/2005

Source: Underground storage tank cleanup Waste Waste Flammable Liquids

Stream: (xylene, toluene)

Waste D001, D008 **CAS Codes:** Codes:

Form: Paint thinner or petroleum distillates

Managed 0 KG **Reported:** 50.00 GAL = 189.22 KG**Onsite:**

Shipments: 50.00 Energy recovery or fuel 04/06/2004 03083J TND000772186 blending

2003 0 **CEG** 12/30/2003 01/30/2004 2002 **CEG** 0 12/24/2002 01/09/2003 2001 **CEG** 0 12/26/2001 01/03/2002

2000 **CEG** 0 01/05/2001 01/26/2001 1999 **CEG** 0 01/06/2000 01/13/2000

1998 **CEG** 0 01/15/1999 01/25/1999

1997 CEG 0 12/29/1997 01/09/1998

0 1996 **CEG** 12/30/1996 02/10/1997

1995 **CEG** 0 12/27/1995 02/07/1996

-	1004 9	0.0		0.700	10/0/	2/1004 00/10/1007
?	1994 S	QG 2		0.528	12/30	0/1994 02/13/1995
			int (releasing ag nanent mold ca			Other surface oating/preparation
	Waste Codes:	D010			CAS Codes:	
	Form:	Solid resins or	polymerized or	rganics		
	Reported:	800.00 LB = 3	64.00 KG		Managed Onsite: 0	KG
	Shipments:	07/22/1994 ()2279 WAD991	281767 800. LB	00 fixation u	
	Waste Stream:		pent nonhaloge a Safety Kleen		Source: d	Other cleaning and egreasing
	Waste Codes:	D001, D018, I	0039		CAS Codes:	
	Form:	Nonhalogenate	ed solvent			
	Reported:	361.80 LB = 1	64.00 KG		Managed Onsite: 0	KG
	Shipments:	03/18/1994 4	18749 ORD981	766124 ^{201.0} LB	00 Fractio	nation/distillation
		01/21/1994 2	25385 ORD981	766124 ^{160.8} LB	Fractio	nation/distillation
?	1993 Se	QG 2		0.738	12/30	0/1993 02/22/1994
		-	lated material (c ene) flammable	•	Source:	Painting
	Waste Codes:	D001, F002, F	003, F005		CAS Codes:	
	Form:	Organic paint,	ink, lacquer, or	varnish		
	Reported:	50.00 GAL = 1	190.00 KG		Managed Onsite:	0 KG
	Shipments:	01/20/1993	01792 WAD9	81769110	50.00 GAL	Fuel blending
	Stream:	solvent) from	pent non-halogo a Safety Kleen		Source:	Other cleaning and degreasing
	Waste Codes:	D001, D039			CAS Codes:	
	Form:	Nonhalogenate	ed solvent			
	Reported:	180.00 GAL =	548.00 KG		Managed Onsite:	0 KG
	Shipments:	11/23/1993 7	78999 ORD981	766124 30.00 GAL	Bractio	nation/distillation

		09/29/1993 2	28901 C	1RT19XT766T74	6.00 GAL	Fraction	nation/distillation
		08/04/1993	76349 C	1RT19XT766T74	1.00 GAL	Fraction	nation/distillation
		06/08/1993 2	20297 C	1R L 19X L 766 L 77L	0.00 GAL	Fraction	nation/distillation
		04/12/1993	52939 C	1RT19XT766T74	1.00 GAL	Fraction	nation/distillation
		02/18/1993 ()3898 C	1R L 19X L 766 L 77L	2.00 GAL	Fraction	nation/distillation
?	1992 Se	QG 3		3.78	83795	12/29	/1992 02/23/1993
				l releasing agent azard due to high	S	niirce:	ther surface pating/preparation
	Waste Codes:	D002			(CAS Codes:	
	Form:	Other aqueous	waste v	with low dissolve	d solids	S	
	Reported:	2370.00 LB =	1074.80) KG		naged Insite: 10)74.80 KG
	Shipments:					Jusice.	
				aterial flammable hyl benzene an	S	ource: Pa	ainting
	Waste Codes:	D001, F002, F	6003, F0	05	(CAS Codes:	
	Codes:			05 genated solvent m			
	Codes: Form:		onhalog	genated solvent m	nixture M a	Codes:	KG
	Codes: Form:	Halogenated/n	onhalog 2032.00	genated solvent m	nixture Ma	Codes:	KG Fuel blending
	Codes: Form: Reported:	Halogenated/n 4471.00 LB = 10/21/1992 08/26/1992	2032.00 01695 01645	genated solvent m O KG WAD981769110 WAD981769110	Ma Ma 0 0 142 0 435	codes: anaged Onsite: 22.00 LB	Fuel blending Fuel blending
	Codes: Form: Reported:	Halogenated/n 4471.00 LB = 10/21/1992	2032.00 01695 01645 01613	genated solvent m) KG WAD981769110	Ma 0 0 142 0 435 0 435	codes: anaged Onsite: 22.00 LB	Fuel blending
	Codes: Form: Reported:	Halogenated/n 4471.00 LB = 10/21/1992 08/26/1992 07/30/1992 06/25/1992 Solvent 105 sp	2032.00 01695 01645 01613 01576	genated solvent m O KG WAD981769110 WAD981769110 WAD981769110	Ma 0 142 0 435 0 435 0 217	naged Onsite: 02.00 LB 5.00 LB 79.00 LB	Fuel blending Fuel blending Fuel blending
	Codes: Form: Reported: Shipments:	Halogenated/n 4471.00 LB = 10/21/1992 08/26/1992 07/30/1992 06/25/1992 Solvent 105 sp solvent from a c	2032.00 01695 01645 01613 01576	genated solvent m O KG WAD981769110 WAD981769110 WAD981769110 WAD981769110	Ma (0) 142 (0) 435 (0) 435 (0) 217 mer So	naged Onsite: 02.00 LB 5.00 LB 79.00 LB	Fuel blending Fuel blending Fuel blending Fuel blending ther cleaning and
	Codes: Form: Reported: Shipments: Waste Stream: Waste Codes:	Halogenated/n 4471.00 LB = 10/21/1992 08/26/1992 07/30/1992 06/25/1992 Solvent 105 sp solvent from a c	2032.00 01695 01645 01613 01576 eent non	genated solvent m O KG WAD981769110 WAD981769110 WAD981769110 halogenated Kleen parts wash	Ma (0) 142 (0) 435 (0) 435 (0) 217 mer So	codes: anaged Onsite: 22.00 LB 5.00 LB 6.00 LB 79.00 LB Ource: CAS	Fuel blending Fuel blending Fuel blending Fuel blending ther cleaning and
	Codes: Form: Reported: Shipments: Waste Stream: Waste Codes: Form:	Halogenated/n 4471.00 LB = 10/21/1992 08/26/1992 07/30/1992 06/25/1992 Solvent 105 sp solvent from a c D001, D039	2032.00 01695 01645 01613 01576 pent non a Safety	genated solvent m O KG WAD981769110 WAD981769110 WAD981769110 halogenated Kleen parts wash	Ma (0) 142 (0) 435 (0) 435 (0) 217 (1) Ma	codes: anaged Onsite: 2.00 LB 5.00 LB 6.00 LB 79.00 LB CAS Codes:	Fuel blending Fuel blending Fuel blending Fuel blending ther cleaning and
	Codes: Form: Reported: Shipments: Waste Stream: Waste Codes: Form:	Halogenated/n 4471.00 LB = 10/21/1992 08/26/1992 07/30/1992 06/25/1992 Solvent 105 sp solvent from a c D001, D039 Nonhalogenate 1489.00 LB =	2032.00 01695 01645 01613 01576 Dent non a Safety	genated solvent m O KG WAD981769110 WAD981769110 WAD981769110 MAD981769110 halogenated Kleen parts wash nt KG	Ma (0) 142 (0) 435 (0) 435 (0) 217 (1) Ma	codes: anaged Onsite: 22.00 LB 6.00 LB 6.00 LB 79.00 LB Ource: CAS Codes: anaged Onsite: 0	Fuel blending Fuel blending Fuel blending Fuel blending ther cleaning and egreasing

	09/02/1992 034	492 ORD000712067	172.00 I B	Fractionation/distillation
		51L ORD000712067	22	Fractionation/distillation
	05/13/1992 448	378 ORD000712067	258.00 LB	Fractionation/distillation
	03/17/1992 732	253 ORD000712067	258.00 LB	Fractionation/distillation
	01/21/1992 599	918 ORD000712067	258.00 LB	Fractionation/distillation
SÇ	QG 2	1.	75816	11/01/1991 03/02/1992

1991

SOLVENT 105 (SPENT NON-

HALOGENATED SOLVENT) FROM A

SAFETY - KLEEN PARTS WAS

Other cleaning and Source:

degreasing

Waste D001 **Codes:**

CAS Codes:

Form: Nonhalogenated solvent

Reported: 330.00 GAL = 960.00 KG

Managed 0 KG

Onsite:

Shipments:

11/27/1991 46074 ORD000712067 30.00 **GAL** 10/09/1991 37378 ORD000712067 30.00

Fractionation/distillation

Fractionation/distillation

08/08/1991 33640 ORD092895481

60.00 GAL

Fractionation/distillation

06/13/1991 30387 ORD092895481

60.00 GAL

Fractionation/distillation

04/19/1991 38095 ORD092895481

60.00 **GAL**

Fractionation/distillation

02/21/1991 45261 ORD092895481

60.00 **GAL**

Fractionation/distillation

SPENT PERMANENT MOLD

Waste RELEASING AGENT FROM

Stream: COATING MOLDS. HAZARDOUS

DUE TO H

Other surface coating/preparation

Waste D002 **CAS** Codes: **Codes:**

Form: Other aqueous waste with low dissolved solids

Reported: 220.00 GAL = 798.16 KG

Managed 798.16 KG **Onsite:**

Shipments:

ORD009056037 2 SPENT PERMANENT MOLD RELEASING AGENT FROM COATING MOLDS. HAZARDOUS DUE TO H D002 B114 N A29 GAL 8 PPG ON 220 M121 SOLVENT 105 (SPENT NON-HALOGENATED SOLVENT) FROM A SAFETY -ORD009056037 1 KLEEN PARTS WAS D001 B203 A19 GAL 6.4 PPG OFF

ORD009056037	1	02/21/1991	45261 60.00	M021	ORD092895481
ORD009056037	1	04/19/1991	38095 60.00	M021	ORD092895481
ORD009056037	1	06/13/1991	30387 60.00	M021	ORD092895481
ORD009056037	1	08/08/1991	33640 60.00	M021	ORD092895481
ORD009056037	1	10/09/1991	37378 30.00	M021	ORD000712067
ORD009056037	1	11/27/1991	46074 30.00	M021	ORD000712067

ORD009056037 ORD000712067 ORD009056037 ORD092895481 $\begin{array}{cccc} N & Y & Y \\ N & Y & Y \end{array}$

ORD009056037 1	Spent permanent mol	ld releasing agent fro	m coating molds Haz	ard due to high	D002
A29 B114	N	2370 LB	ON 2370	M121	
ORD009056037 2	Waste paint related m	naterial flammable li	quid comprised of eth	yl benzene an	D001
F002 F003 F005	A21	B204	N	4471 LB	
OFF					
ORD009056037 3	Solvent 105 spent no	nhalogenated solven	t from a Safety Kleen	parts washer c	D001
D039	A19	B203	N 148	9 LB	OFF

ORD009056037	2	06/25/1992	01576 2179.00	M061	WAD981769110
ORD009056037	2	07/30/1992	01613 435.00	M061	WAD981769110
ORD009056037	2	08/26/1992	01645 435.00	M061	WAD981769110
ORD009056037	2	10/21/1992	01695 1422.00	M061	WAD981769110
ORD009056037	3	01/21/1992	59918 258.00	M021	ORD000712067
ORD009056037	3	03/17/1992	73253 258.00	M021	ORD000712067
ORD009056037	3	05/13/1992	44878 258.00	M021	ORD000712067
ORD009056037	3	07/06/1992	7451L 258.00	M021	ORD000712067
ORD009056037	3	09/02/1992	03492 172.00	M021	ORD000712067
ORD009056037	3	10/30/1992	33968 199.00	M021	ORD000712067
ORD009056037	3	12/21/1992	55154 172.00	M021	ORD000712067

ORD009056037 ORD000712067 ORD009056037 WAD981769110 $\begin{array}{cccc} N & Y & Y \\ N & Y & Y \end{array}$

ORD009056037 1 Waste paint related material (ethyl benzene), toluene) flammable liquid UN1 D001 F002 F003 F005 50 A21 B209 N GAL 8.345 2. (additional) D039. PPG OFF ORD009056037 2 Solvent 105 (spent non-halogenated solvent) from a Safety Kleen parts washe D001 180 GAL 6.7 D039 A19 B203 N PPG OFF

ORD009056037	1	01/20/1993	01792 50.00	M061	WAD981769110
ORD009056037	2	02/18/1993	03898 32.00	M021	ORD981766124
ORD009056037	2	04/12/1993	62939 31.00	M021	ORD981766124
ORD009056037	2	06/08/1993	20297 30.00	M021	ORD981766124
ORD009056037	2	08/04/1993	76349 31.00	M021	ORD981766124
ORD009056037	2	09/29/1993	28901 26.00	M021	ORD981766124
ORD009056037	2	11/23/1993	78999 30.00	M021	ORD981766124

ORD009056037 ORD981766124 ORD009056037 WAD981769110 $\begin{array}{cccc} N & Y & Y \\ N & Y & Y \end{array}$

ORD009056037 2 Solvent 105 (spent nonhalogenated solvent) from a Safety Kleen parts washer D001 D018 D039 A19 B203 N 361.8 LB #6 Maintenance parts cleaning and degreasing OFF ORD009056037 1 Spent mold paint (releasing agent) from aluminum permanent mold casting ope D010 B403 800 #6 The A29 N LB surface coating is utilized in an aluminum foundry as a releasing agent from permanene molds (steel)

ORD009056037	2	01/21/1994	25385	160.80	M021	ORD981766124
ORD009056037	2	03/18/1994	48749	201.00	M021	ORD981766124
ORD009056037	1	07/22/1994	02279	200 008	M111	WAD991281767

ORD009056037 1 Waste Flammable Liquids (xylene, toluene) D001 D008 50 GAL 8.345 PPG OFF G45 W211

0

0

ORD009056037 0 ORQ000008003 RMCAT Environmental Services UNITED

STATES N Y N

ORD009056037 0 TND000772186 Pollution Control Industries of Tennesse 5485 Tay-For Drive

Millington TN 38053 UNITED STATES N N Y

Remit and make checks payable to:
Department of Environmental Quality
Attn: Business Office
811 SW Sixth Avenue

Portland, OR 97204-1390



FOR DEQ USE ONL Date Received:	Y
Amount Received:	
Check No.:	

INVOICE

Number: HW96GEN-0333

Issue Date: 10/10/95

TO:

Ernest Nimister Consolidated Metco Inc 13940 N Rivergate Blud PO Box 83201 Portland OR 97283-0201 EPA ID: ORDOO9056037 Consolidated Metco Inc 13940 N RIVERGATE BLVD

PORTLAND OR 97203

1994 HAZARDOUS WASTE GENERATION ACTIVITIES

Item or Reference	Fee S	Amount (kg)	Fee (0.060)
그리아 얼굴한 그렇게 하는 가니 생각하는 하나요요.	Factor	managed	x amount managed
Small Quantity Generator status fee			\$200.00
Solvents Recovery fee	0.50	164	\$4.92
Stabilization fee	1.00	364	\$21.84

Total Generation Fee:

\$26.76

Sandy OK TO Pary Cha-Rivergolo: 10/16/95 Emil

INVOICE TOTAL:

\$226.76

PAYMENT DUE BY:

11/24/95

A \$22.67 late charge will be assessed on fees received after the due date.

NOTE: Please return pink copy of this invoice with your remittance to ensure proper credit

Remit and make checks payable to: **Department of Environmental Quality** Attn: Business Office 811 SW Sixth Avenue Portland, OR 97204-1390



FOR DEQ USE ONLY				
Date Received:	-			
Amount Received:				
Check No.:				

INVOICE

Number: HW95GEN-0301

Issue Date: 12/16/94

TO:

Ernest Nimister Consolidated Metco Inc 13940 N Rivergate Blud PO Box 83201 Portland OR 9728第-0201

EPA ID: ORDO09056037 Consolidated Metco Inc. 13940 N RIVERGATE BLVD

PORTLAND OR 97203

1993 HAZARDOUS WASTE GENERATION ACTIVITIES

Item or Reference	Amount (kg)Fee (*0.060)
na nazi a debit in tra de la compania	managed x amount managed
Small Quantity Generator status fee Solvents Recovery fee 0.50	\$200.00 546 \$16.38
Fuel Blending fee 0.75	190 \$8.55

Total Generation Fee:

\$24.93

INVOICE TOTAL:

PAYMENT DUE BY:

01/31/95

A \$22.49 late charge will be assessed on fees received after the due date.

NOTE:

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Remit and make checks payable to:
Department of Environmental Quality
Attn: Business Office
811 SW Sixth Avenue
Portland, OR 97204-1390



FOR DEQ USE ONLY Date Received: ______ Amount Received: ______ Check No.: _____

INVOICE

Number: HW94GEN-0254

Issue Date: 02/11/94

TO:

Ernest Nimister

Consolidated Metco Inc 13940 N Rivergate Blud PO Box 83201 Portland OR 97283-0201 EPA ID: ORDO09056037

Consolidated Metco Inc. 13940 N. RIVERGATE BLUD

PORTLAND OR 97203

1992 HAZARDOUS WASTE GENERATION ACTIVITIES

Item or Reference	Fee Factor	Amount (kg) managed	Fee (0.060) x amount managed
Small Quantity Generator status fee			\$200.00
Solvents Recovery fee	0.50	714	\$21.42
Fuel Blending fee	0.75	2,032	\$91.44
RCRA-Exempt Management Methods fee	00,00	1,077	\$0.00

Total Generation Fee:

\$112.86

Sandy OK TO Pay 2/17/94 Pr

INVOICE TOTAL:

\$312.86

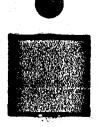
PAYMENT DUE BY:

03/31/94

A \$31.28 late charge will be assessed on fees received after the due date.

NOTE:

Please return pink copy of this invoice with your remittance to ensure proper credit





Remit and Make Checks Payable to:

Department of Environmental Quality

Attn: Business Office 811 S.W. Sixth Avenue Portland, OR 97204

TO:

CONSOLIDATED METCO INC. PO BOX 83201 PORTLAND, OR 97283-0201 ATTN: ERNEST NIMISTER



FOR D	EQ	USE	ONLY	
Date Received:				
Amount Received:		·		
Check No.:				

Number: HW93GEN-0150

Date: 12/15/92

PERMIT NUMBER	ITEM OR REFERENCE	AMOUNT DUE	DATE DUE
	EPA ID: ORD009056037		
	Location: 13940 N. RIVERGATE BLVD. PORTLAND		
	Annual Registration Verification Fee	\$200	01/22/93
	A 10% late charge will be assessed on fees received after the due date shown.		VIVEE
	Sandy		
	OK TO	bond.	

NOTE: Please return pink copy of this invoice with your remittance to ensure proper credit.

DEQ 55 - 11/86





6. TYPE OF HAZARDOUS WASTE ACTIVITY	
MARK ALL ADDRODDIATE DOVIES.	ĵ
YES NO A. HAZARDOUS WASTE TRANSPORTERS (FOR TRANSPORTERS ONLY) TYPE OF COMBUSTION DEVICE (MARK ALL APPROPRIATE BOXES TO INDICATE TYPE OF COMBUSTION DEVICE(S) IN WHITE HAZARDOUS WASTE FUEL IS BURNED)	CH
1. TYPE OF TRANSPORTER (MARK APPROPRIATE BOX(ES))	
☐ a. FOR OWN WASTE ONLY ☐ b. INDUSTRIAL BOILER	
☐ b. FOR COMMERCIAL PURPOSES ☐ c. INDUSTRIAL FURNACE 2. MODE OF TRANSPORTATION ☐ d. OTHER (MEASE SPECIES)	
C. AIR C. C. CHILLIAN C. A. MATER C. OTTIER	<u></u> -
YES NO YES NO B. HAZARDOUS WASTE GENERATOR WATER 6. OTHER YES NO H. USED OIL FUEL ACTIVITIES (MARK APPROPRIATE BOXES) 1. GENERATOR MARKETING TO BURNER	
YES NO Z. OTHER MARKETER OF OF-SPECIFICATION USED OIL FUEL MARKETER WHO FIRE 3. SPECIFICATION USED OIL FUEL MARKETER SPECIFICATION USED OIL FUEL SPECIFICATION USED OIL FUEL SPECIFICATION USED OIL FUEL SPECIFICATION USED OIL FUEL SPECIFICATION U	
YES NO D. HAZARDOUS WASTE STORAGE (NOTE: PERMIT MAY BE REQUIRED.) CLAIMS USED OIL MEETS SPECIFICATIONS 4. BURNER OF OFF-SPECIFICATION USED OIL	
YES NO. (INDICATE TYPE OF COMBUSTION DEVICE) TYPE OF COMBUSTION DEVICE TYPE OF COMBUSTION DEVICE	•
YES NO (MARK ALL APPROPRIATE BOXES TO INDICATE TYPE OF COMBUSTION DEVICE(S) IN WHO OFF-SPECIFICATIONS SUSED OIL IS BURNED)	ICH
□ 1. On-site 区 2. Off-site □ a. UTILITY BOILER VES NO □ b. INDUSTRIAL BOILER	
G. MARKET OR BURN HAZARDOUS WASTE FUELS	
(MARK APPROPRIATE BOXES)	
□ 1. GENERATOR MARKETING TO BURNER	
	٠.
7. DESCRIPTION OF HAZARDOUS WASTE-WASTE GODE	
A. LISTED HAZARDOUS WASTE (SEE 40 CFR 261.30-33) USE ADDITIONAL SHEETS IF NECESSARY	
	- -
K K K K F F F F	
P P P U U U U U	-
B. CHARACTERISTIC HAZARDOUS WASTE (SEE 40CFR 261.20-24)	
IGNITABLE FETOXIC (MARK SPECIFIC CONTAMINANTS RELOW!)	
CORROSIVE	
□ D005 □ D009 □ D017	
☐ REACTIVE ☐ D006 ☐ D010 ☐ D014	٠.
(D003) D007 D011 D015	
C. OTHER WASTES (STATE OR NON-REGULATED WASTES REQUIRING AN ID NUMBER - SEE INSTRUCTIONS)	
X 001 X 002 X X X X X X X X X X X X X X X X X	
LI 7501 LI 7502 LI 7 LILILI LI 7 LILILI LI 7 LILILI LI 10 USE ADDITIONAL SHEETS IF NECESSARY	
8. HAZARDOUS WASTE GENERATOR STATUS (COMPLETE IF APPLICABLE)	
(MARK ONE ONLY) DETERMINE MAXIMUM AMOUNT OF HAZARDOUS WASTE GENERATED IN ANY ONE CALENDAR MONTH	
 generate 2,200 or more pounds of hazardous waste 	
FRG (Fully egenerate 2,200 or more pounds of spill cleanup debris egenerate more than 2.2 pounds of acutely hazardous waste	
FRG (Regulated) • generate more than 2.2 pounds of acutely hazardous waste • generater more than 220 pounds of spill cleanup debris containing an acutely hazardous waste	
accumulate, at any time, more than 2.2 pounds of acutely hazardous waste on-site	
• generate more than 220 pounds and less than 2,200 pounds of hazardous waste SQG (Small) e generate more than 220 pounds and less than 2,200 pounds of spill cleanup debris containing hazardous	
SQG (Quantity) • generate more than 220 pounds and less than 2,200 pounds of spill cleanup debris containing nazardous waste	
 accumulate, at any time, more than a total of 2,200 pounds of hazardous waste on-site 	
• generate 220 pounds or less of hazardous waste	
CEG (Conditionally) • generate 220 pounds or less of spill cleanup debris containing hazardous waste	
Generator / • generate 2.2 pounds or less of acutely hazardous waste	
• accumulate, at any time, up to 2,200 pounds of hazardous waste on-site	
(NOTE: RESPONSE IS OPTIONAL FOR CONDITIONALLY EXEMPT GENERATORS)	
9. CERTIFICATION SIGNATURE (MAT M. James	
alice las	
ERNEST M. NIMISTER MATERIALS MANAGRY 7/16/9/ NAME (please print or type) OFFICIAL TITLE DATE SIGNED	
NAME (please print or type) OFFICIAL TITLE U DATE SIGNED	

I certify that the information provided herein and appended hereto is true and accurate to the best of my knowledge, information and belief. Title 18 U > S > C > 1001 makes it a criminal offense for any person knowingly and willingly to make to any Agency or Department of the United States any false or fraudulent statements as to any matter within its jurisdiction.

6. TYPE OF HAZARDOUS WASTE ACTIVITY
MARK ALL APPROPRIATE BOX(ES)) 3. BURNER (INDICATE TYPE OF COMBUSTION DEVICE) TYPE OF COMBUSTION DEVICE
A. HAZARDOUS WASTE TRANSPORTERS (FOR TRANSPORTERS ONLY) 1. TYPE OF TRANSPORTER (MARK APPROPRIATE BOX(ES)) 2. FOR OWN WASTE ONLY 3. FOR COMMERCIAL PURPOSES 4. UTILITY BOILER 5. INDUSTRIAL BOILER 6. INDUSTRIAL FURNACE 7. INDUSTRIAL FURNACE 8. OTHER (PLEASE SPECIFY)
A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR B. HAIL C. HIGHWAY C. WATER B. UTHER A. AIR C. HIGHWAY C. WATER B. UTHER A. AIR C. HIGHWAY C. WATER B. UTHER A. UTHER MARKETER OF OFF-SPECIFICATION USED OIL A. BURNER OF OFF-SPECIFICATION USED OIL BURNER OF OFF-SPECIFICATION USED O
en e
7. DESCRIPTION OF HAZARDOUS WASTE-WASTE CODE
A. LISTED HAZARDOUS WASTE (SEE 40 CFR 261.30-33) USE ADDITIONAL SHEETS IF NECESSARY
K K K F F F
P P P U U U U U
B. CHARACTERISTIC HAZARDOUS WASTE (SEE 40CFR 261.20-24) IGNITABLE
A LICENSE OF THE STATE OF THE S
8. HAZARDOUS WASTE GENERATOR STATUS (MARK ONE ONLY) DETERMINE MAXIMUM AMOUNT OF HAZARDOUS WASTE GENERATED IN ANY ONE CALENDAR MONTH • generate 2,200 or more pounds of hazardous waste • generate 2,200 or more pounds of spill cleanup debris • generate more than 2.2 pounds of acutely hazardous waste • generate more than 220 pounds of spill cleanup debris containing an acutely hazardous waste • accumulate, at any time, more than 2.2 pounds of acutely hazardous waste on-site
SQG (Small Quantity Generator) • generate more than 220 pounds and less than 2,200 pounds of hazardous waste • generate more than 220 pounds and less than 2,200 pounds of spill cleanup debris containing hazardous waste • accumulate, at any time, more than a total of 2,200 pounds of hazardous waste on-site
CEG (Conditionally Exempt) • generate 220 pounds or less of hazardous waste • generate 220 pounds or less of spill cleanup debris containing hazardous waste • generate 2.2 pounds or less of acutely hazardous waste • accumulate, at any time, up to 2,200 pounds of hazardous waste on-site (NOTE: RESPONSE IS OPTIONAL FOR CONDITIONALLY EXEMPT GENERATORS)
9. CERTIFICATION SIGNATURE (mut M. / lame)
ERNEST M. NIMISTER MATERIALS MANAGER 9/16/91 NAME (please print or type) OFFICIAL TITLE DATE SIGNED

I certify that the information provided herein and appended hereto is true and accurate to the best of my knowledge, information and belief. Title 18 U > S > C > 1001 makes it a criminal offense for any person knowingly and willingly to make to any Agency or Department of the United States any false or fraudulent statements as to any matter within its jurisdiction.

Remit and Make Checks Payable to:

Department of Environmental Quality

Attn: Business Office 811 S.W. Sixth Avenue Portland, OR 97204

T0:

Consolidated Metco Inc P O Box 83201 Portland, OR 97283-0201 ATTN: Ernie Nimister



INVOICE

	Q USE	

Date Received:

Check No.:

Number: HW92GEN=0644

Date: 11/20/9.1

BMIT NUMBER	ITEM OR REFERENCE	AMOUNT DUE	
	EPA ID: ORD009056037		
	Location: 13940 N. RIVERGATE BLVD. PORTLAND		
	Generator Fee for 1.3383 metric tons	\$540	
	A 10% late charge will be assessed on fees received after the due date shown,	e de la companya del companya de la companya del companya de la co	
	received after the due date shown. FERS 1990: Hazarbous Generated THUSE		
######################################	Hazardous Generated The		eren eren eren eren eren eren eren eren
	TH050		

NOTE: Please return pink copy of this invoice with your remittance to ensure proper credit.

DEQ 55 + 11/8

	BILL & S X PORTLAND 13940 N. RIP P.O. BOX 83 PORTLAND, (503) 286-5 FAX (503) 2 Z6 2 TO: Att 81.1 Por GENTLEMEN PLEASE FUR SPECIFIED O	PLANT VERGATE BL 3201 OR 97283-0 741 40-5443 CT	MONROE P.O. BOX 780 PATI MONROE (704) 28 FAX (704 / 2623 OF ENVI Busine Sixth od	PLANT CLA 1907 104 100 AVE. CLA 1, NC 28110 (50 9-6491 FAX 1) 289-5012 130 RD. QUA 15 Dffi AVenue	C e O R	CASHIERS PLANT HIGHWAY 64 CASHIERS, NC 2871 (704) 743-3461 FAX (704) 743-5738	PAGE			Our order number all corresponshipping paper or S8867 DATE 7/27/90 DELIVERY REQUIRED SEE BELOW TERMS	
ITEM	PART NUM	IBER		DESC	RIPTION		ACCOUNT	QUANTIT	Y UM	UNIT PRICE	TOTAL PRICE
1.							NUMBER 10089748		L.T	685.0000	.00
		F		METRIC 407	(7-11-90 TONS).	DEQ C					
		ľ		141111111111111111111111111111111111111					-		
-		• • .								TOTAL	
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	- 1	4									
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Remit and Make Checks Payable to:

Department of Environmental Quality

Attn: Business Office 811 S.W. Sixth Avenue Portland, OR 97204

T0:

Consolidated Metco, Inc. PO Box 03201 Portland, OR 97203 ATTN: Don Hill



FOR DEQ USE	ONLY
Date Received:	d .
Amount Received:	
Check No.:	

Number:	HW91GEN-0657
Date:	07/11/90

PERMIT NUMBER	ITEM OR REFERENCE	AMOUNT DUE	DATE DUE
	EPA ID: ORD009056037		
	Location: 13940 N. RIVERGATE BLVD.		
	PORTLAND		
	Generator Fee for 1.9674 metric tons	\$685	08/10/90
	A \$200 late charge will be assessed on fees received after the due date		08/10/70

NOTE: Please return pink copy of this invoice with your remittance to ensure proper credit.

DEQ 55 - 11/86

Invoice Number: HW92GEN-0644 EPA ID: ORD009056037

Facility Name: CONSOLIDATED METCO INC. Location: 13940 N. RIVERGATE BLVD. PORTLAND

Manifest Number TSD EPA ID	TSD Name		Shipping Date	Receiving Date
# Data From	Metric Tons Pounds Gallon	Waste s Code Waste Descr	iption	
76505 ORD092895481 1 TSD	SAFETY KLEEN CORPORATION .0782 172	21 DO01 NON-LISTED I	IGNITABLÉ	26-JAN-90
76505 ORD092895481 1 Generator	SAFETY KLEEN CORPORATION .0782 172	21 D001 NON-LISTED 1	26-JAN-90 IGNITABLE	26-JAN-90
51890 ORD092895481 1 TSD	SAFETY KLEEN CORPORATION .0782 172	21 D001 NON-LISTED 1	IGNITABLE	30-JAN-90
91132 ORD092895481 1 Generator	SAFETY KLEEN CORPORATION .0782 172	21 DOO1 NON-LISTED 1	19-MAR-90 IGNITABLE	19-MAR-90
00876 WAD981769110 1 Generator	SOL-PRO, INC. .1441 317	38 DOO1 NON-LISTED 1	,	25-APR-90
00875 ORD009020231 1 Generator	TEKTRONIX - BEAVERTON CAMP .5686 1251	US 150 D002 NON-LISTED (07-MAY-90 CORROSIVE	07-MAY-90
20229 ORD092895481 1 Generator	SAFETY KLEEN CORPORATION .0391 86	10 D001 NON-LISTED 1	17-MAY-90 IGNITABLE	17-MAY-90
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75538 ORD092895481 1 Generator	SAFETY KLEEN CORPORATION .0391 86	10 D001 NON-LISTED 1		21-DEC-90

Hazardous Waste Generated in 90 By CONSOLIDATED METCO INC. (ORD009056037)

Total Metric Tons	Total Pounds	Total Gallons
1.3383	2944	353

Remit and Make Checks Payable to:

Department of Environmental Quality

Attn: Business Office 811 S.W. Sixth Avenue Portland, OR 97204

TO:

Consolidated Metco, Inc P.O.Box 03201 Portland, OR 97203 ATTN: Don Hill



FOR DEQ U	SE ONLY
Date Received:	
Amount Received:	
Check No.:	· · · · · · · · · · · · · · · · · · ·

Number: HW90GEN-0125

Date: 10/30/89

PERMIT NUMBER	ITEM OR REFERENCE	AMOUNT DUE	DATE DUE
	EPA ID: ORDO09056037		
	LOCATION: 13940 N. RIVERGATE BLVD. PORTLAND		
	GENERATOR FEE FOR .4726 METRIC TONS	\$230	11/20/00
	A \$200 late charge will be assessed on fees received after the due date		11/30/89
		,	
	OK to pay		

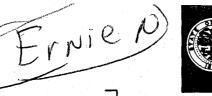
NOTE: Please return pink copy of this invoice with your remittance to ensure proper credit.

DE0 65 11/06

July Oscissor

MBMIT AND WAKE CHECKS rayable to. Department of Environmental Quality Attn: Business Office

811 S.W. Sixth Avenue Portland, OR 97204



Date Received: Amount Received: Check No.:_

CONSOLIDATED METCO, INC. P.O.BOX 03201 PORTLAND, OR T0: 97203 ATTN: DON HILL

INVOICE

HW896EN-0113 Number: 06/30/88 Date:

ERMIT NUMBER	ITEM OR REFERENCE	RECEIVE	AMOUNT DUE	DATE DUE
	EPA ID: ORDO09056037	JUN 30 1988	} }	
	LOCATION: 13940 N. RIVERGATE BLVD. PURTLAND	COMMON DATED METER		
	GENERATOR FEE FOR 0-0978 METRIC TONS		\$ 230	08/15/88
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NOTE: Please return pink copy of this invoice with your remittance to ensure proper credit.

DEQ 55 - 11/86

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he addition of a late fee and fees are not received by the due s 10% interest on the total for every days overdue will be sent to the tion and increased by 20% plus an A late fee of \$200 will be charged bill is overdue.

vironmental Quality

Please call Lisa Frost at 229-5123 or Kathi Futornick at 229-5826 or tollfree at 1-800-452-4011 if you have any questions. Thank you for your cooperation.

Sincerely,

Jan Whitworth, Manager Hazardous Waste Section

Hazardous and Solid Waste Division

JW:LF:b ZB7601A Enclosure(s)

CONSOLIDATED METCO, INC.

PURCHASE ORDER

PURCHASE 1499

September 17, 1987

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PORTLAND PLANT
P.O. BOX 03201
PORTLAND, OREGON 97203

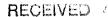
MONROE PLANT P.O. BOX 907 MONROE, N.C. 28110

SIDNEY PLANT
P.O. BOX 341
SIDNEY, OHIO 45365

CLACKAMAS PLANT 10448 HWY, 212 CLACKAMAS, OR 97015

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INE NO.	DATE WANTED	QUANTITY	U/M	PART NUMBER / DESCRIPTION	UNIT PRICE	ACCT. NO.	REQ. NO.	воите то
	AS ROTED	6.4635		Annual Fees For Hazardous Waste Generated by Consolidated Metco, Inc., Rivergate Division For the Previous Caleadar Year (July 1, 1985 Through June 30, 1986) For 6.4635 Netric Toss	\$550.00 TOTAL	11- 6332- 32	23563	D. #111
				BEFERENCE: Invoice HW88GER-0191 CRI EPA ID: ORD 009056037				
				NOTE: Reference Table I of the attached chart for charges.				
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PURCHASING AGENT Pamela P. Schoults ပ





Department of Environmental Quality SEP 1 5 1987

811 S.W. SIXTH AVENUE, PORTLAND, OREGON 97204 PHONE: (503) 229-5696

September 11, 1987

Don Hill Consolidated Metco, Inc. 13940 North Rivergate Boulevard P.O.Box 03201 Portland, OR

97203

Re: Hazardous Waste Fees ORD 009056037

On July 17, 1987, the Department adopted a new hazardous waste generator fee schedule. Under OAR 340-102-065, the Department has authority to assess hazardous waste fees. For your information we have enclosed a copy of the new fee schedule that applies to your waste management activities.

The Department determines the fee amount based on the weight of hazardous waste generated during the previous calendar year and reported monthly or quarterly by you as required under OAR 340-102-041.

Your hazardous waste fee for calendar year 1986 is payable to the Department in the amount of \$550. The fee is due and payable in full by the due date specified on the attached invoice.

Please send your payment to:

Department of Environmental Quality 811 S.W. Sixth Avenue Portland, OR 97204

Attention: Business Office

If you have any questions, call Jim Vilendre at 229-5549 or Gary Calaba at 229-6534.

Sincerely,

Jan Whitworth, Manager Hazardous Waste Section

JW:b ZB6965.2 Enclosure

cc: Judy Hatton, DEQ



Department of Environmental Quality

811 SW SIXTH AVENUE, PORTLAND, OREGON 97204-1334 PHONE (503) 229-5696

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A PANEL BORDER DE COMPANIES DE C

Hazardous waste generator fees.

340-102-065 (1) Beginning July 1, 1984, each person generating hazardous waste shall be subject to an annual fee based on the weight of hazardous waste generated during the previous calendar year. The fee period shall be the state's fiscal year (July 1 through June 30) and shall be paid annually by July 1.

(2) For the purpose of determining appropriate fees, each hazardous waste generator shall be assigned to a category in Table 1 of this Division based upor the amount of hazardous waste generated in the calendar year identified in section (1) of this rule except as otherwise provided in section (5) of this rule.

Table 1

Hazardous Waste Generation Rate (Metric Tons/Year)	edica (C. C.) difference Palasta (Percapsional		Total <u>Fee</u>
		· · · · · · · · · · · · · · · · · · ·	
<1			
1 but <3		 	300
3 but <14			
14 but <28			
28 but <142			
142 but <284			
>284			

- (3) For the purpose of determining appropriate fees, hazardous waste shall be included in the quantity determinations required by section (1) of this rule as follows:
- (a) Except as provided in subsection (b) of this section, all quantities of "listed" and "characteristic" hazardous waste shall be counted that are:
 - (A) Accumulated on-site for any period of time prior to subsequent management:
 - (B) Packaged and transported off-site;
- (C) Placed directly in a regulated on-site treatment or disposal unit;
- (D) Generated as still bottoms or sludges and removed from product storage tanks.
 - (b) Hazardous wastes shall not be counted that are:

TO:	P.O. Box Portland		iromen v	tal Quality Comply with instructions below:	F.O.B.: TERMS: VIA:	I 13940 N PORTL	AND PLANT J. RIVERGATE AND, OREGON NE PLANT 4, SPOKANE IN NE, WASHINGT AMAS PLANT IWY. 212 AMAS, OR. 97	I.97203 ID. PARK FON 99216	SIDNEY, C MONROE 780 PATT	ICHIGAN ST. OHIO 45365
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		Associated in the control of the con	<u>- FIRMI</u> NG	Inc., Rivergate for to Jume 30, 1986 per Inv generated cubic feet Number OAR 340-102-06 NOTE: REF. TABLE 1 C = \$1,500.00.	dous Waste generated by Conhe period of July 1, 1985 to oice #HW87-69 at the rate of per year under Table 1 per 0. BART 1,000-4,999 CUBIC FEE	through of Ruling	150% etc.			
	PERSON CONT		DRDER	YES NO DATE DLLOW-UP REMARKS & INFORMATI	10					
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P.O.	PORTLAND PLANT P.O. BOX 03201 PORTLAND OREGON 97 artment of Environment Box 1760	rital Quality F.O.B.: F.O.B.: SHIP S	τ	E BLVD. IN 97203 IND. PARK STON 99216	SIDNEY, C	LANT IICHIGAN ST. DHIO 45365
LINE DATE WA	ANTED QUANTITY: U/M	PART NUMBER / DESCRIPTION	UNIT PRICE	ACCT. NO.	REQ. NO.	ROUTE TO
	Fees	Annual Fees for Hazardous Waste generated for the period of 7/1/84 to 6/30/85 per Invoice #HW-022 at the rate of generated cubic feet. 1,000-4,999 = \$1,500.	1,500.	11-6332 -32	23300	D. Hill
	CONFIRMIN	ıg x				
DATE PERSO	THE RESIDENCE OF A CONTROL OF THE SAME AND A SECOND OF THE SAME AND A S	YES NO DATE TO FOLLOW-UP REMARKS & INFORMATION				1
			<u>2</u> 201 Erro	HEMASING AS	nister.	1- 46485

FOR DEQ USE ONLY nemit enu make Unecks Payable to: Descripent of Environmental Quality Date Received: Attn: Fiscal Office P.O. Box 1760 Amount Received: Portland, Oregon 97207 Bank No.: Consolidated Metco, Inc. INVOICE HW-022 Don Hill Number: PO Box 03201 1/1/85 Portland, OR 97203 Date: ITEM OR REFERENCE MIT NUMBER AMOUNT DUE DATE DUE Rate of Generation (cubic feet) D009056037 Hazardous Waste Generator Fee 1,816.21 \$1,500 1/31/85 for 7/1/84 to 6/30/85

NOTE: Please return pink copy of this invoice with your remittance to ensure proper credit.

DEQ 5

STATE OF OREGON

DEPARTMENT OF ENVIRONMENTAL QUALITY

INTEROFFICE MEMO

TO:

Hazardous Waste Generator:

DATE: December 27, 1984

FROM:

Richard Reiter, Manager Hazardous Waste Operations

SUBJECT: Hazardous Waste Generator Fees

On December 14, 1984, the Environmental Quality Commission adopted a schedule of hazardous waste generator fees (see attached). The fees will be used by the Department to partially support its hazardous waste generator compliance inspection and enforcement program. The fees became necessary to offset a reduction in federal fund support for the Department's hazardous waste program. For the period July 1, 1983 to July 1, 1985, funding for the state's hazardous waste program is shared as follows:

Revenue Source	Direct Program Costs	Percent of Program Support
Generator Fees	\$139,086	10.0
Permit Fees	222,130	16.0
Federal Funds	875,800	63.5
General Funds	144.316	10.5
Total	\$1,381,332	100

Based on the schedule contained in rule 340-102-060 and your reported waste generation for calendar year 1983, the Department prepared the enclosed invoice. The amount due shall be remitted to the Department by January 31, 1985.

In the future, invoices will be mailed by July 1 based on the waste generation rate of the previous calendar year. This invoice for fiscal year 1984 (july 1, 1984 to July 1, 1985) was delayed because we did not have final federal fund figures until October 1, 1984. We purposely waited for that figure to insure the Commission could adopt only that fee schedule necessary to offset the shortfall in federal fund support.

If you have any questions on the enclosed invoice, please contact Gary Calaba at 229-6534 or me at 229-6434.

IAN -2 1984

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RPR:b ZB4116 OAR 340-102-060 Subdivision F: Fees

Hazardous waste generator fees.

340-102-060 (1) Beginning July 1, 1984, each person generating hazardous waste shall be subject to an annual fee based on the volume of hazardous waste generated during the <u>previous</u> calendar year. The fee period shall be the state's fiscal year (July 1 through June 30) and shall be paid annually by July 1, except that for fiscal year 1985 the fee shall be paid by January 1, 1985.

- (2) For the purpose of determining appropriate fees, each hazardous waste generator shall be assigned to a category in Table 1 of this Division based upon the amount of hazardous waste generated in the calendar year identified in subsection (1) of this section except as otherwise provided in subsection (5) of this section.
- (3) For the purpose of determining appropriate fees, hazardous waste that is used, reused, recycled or reclaimed shall be included in the quantity determinations required by subsection (1) of this section.
- (4) In order to determine annual hazardous waste generation rates, the Department intends to use generator quarterly reports required by rule 340-102-041; treatment, storage and disposal reports required by 340-104-075; and information derived from manifests required by 340-102-020. For wastes reported in the units of measure other than cubic feet, the Department will use the following conversion factors: 1.0 cubic feet = 7.48 gallons = 62.4 pounds = 0.03 tons (English) = 0.14 drums (55 gallon).

- (5) Owners and operators of hazardous waste treatment, storage and disposal facilities shall not be subject to the fees required by subsection (1) of this section for any wastes generated as a result of storing, treating or disposing of wastes upon which an annual hazardous waste generation fee has already been paid. Any other wastes generated by owners and operators of treatment, storage and disposal facilities are subject to the fee required by subsection (1) of this section.
- (6) All fees shall be made payable to the Department of Environmental Quality.

Table 1

Hazardous Waste Generation Rate (cu.ft./year)	Fee (dollars)
<35	No fee
35-99	\$ 100
100-499	350
500-999	625
1,000-4,999	1500
5,000-9,999	3500
>10,000	5000

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■ A. FIRST NOTIFICATION ■ B. SUBSEQUENT NOTIFICATION (complete item C)	XA. FIRST	NOTIFICATION	B. SUBSEQU	ENT NOTIFICATIO	N (complete iten	n C)				
IX. DESCRIPTION OF HAZARDOUS WASTES Please go to the reverse of this form and provide the requested information.					take die view place is cominan	i de la compagni	والم والمعارض والمرافق		-	

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EPA Form 8700-12 (6-80)

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IX. DESCRIPTION OF HAZARDOUS V	NASTES (continued from from	the second second	at the second of
A. HAZARDOUS WASTES FROM NON—SPE waste from non—specific sources your insta	CIFIC SOURCES. Enter the four	-digit number from 40 CFR Pa	ert 261.31 for each listed hazardous
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7 0 0 0 0 0 0 0 0 0	3 23 36	23 - 26 23	12
B. HAZARDOUS WASTES FROM SPECIFIC specific industrial sources your installation			.32 for each listed hazardous waste from
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C. COMMERCIAL CHEMICAL PRODUCT HAS stance your installation handles which may			- 26 23 - 28 R Part 261.33 for each chemical sub-
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 D. LISTED INFECTIOUS WASTES. Enter the hospitals, medical and research laboratories 			zardous waste from hospitals, veterinary
25 - 26 23 - 30	51	\$2 23 - 26 23	53 54
E. CHARACTERISTICS OF NON-LISTED Hazardous wastes your installation handles.			the characteristics of non-listed
[] 1. IGNITABLE	2. CORROSIVE	3. REACTIVE	(40. TOXIC
I certify under penalty of law that I attached documents, and that based of I believe that the submitted information including the	have personally examined and n my inquiry of those individent on is true, accurate, and com	l am familiar with the info luals immediately responsib plete. I am aware that ther	ole for obtaining the information,
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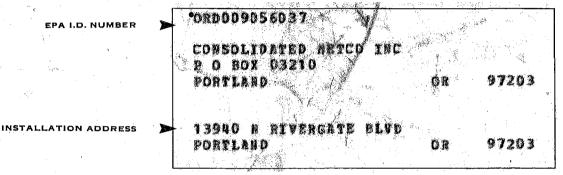
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Jack Porter, Vice President/Administration



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.



EPA Form 8700-12A (4-80)